



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

US EPA RECORDS CENTER REGION 5



460603

PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

**UNIFORM HAZARDOUS
WASTE MANIFEST**

1. Generator's US EPA ID No.

1 I D 016746398

Manifest
Document No.
00009

2. Page 1

of 1

Information in the shaded areas is
not required by Federal law, but
items D, F, H and I are required by
State law.

3. Generator's Name and Mailing Address
MIDWEST TIMER SERVICE, INC.

P.O. BOX 126, 4815 N. M63

BENTON HARBOR, MI 49022

4. Generator's Phone **616 849-2800**

A. State Manifest Document Number

INA 0315919

B. State Generator's ID

C. State Transporter's ID **0079**

D. Transporter's Phone **312-596-3377**

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

AMERICAN CHEMICAL SERVICE

COLFAX AVE AT C&O R.R.

P.O. BOX 190

GRIFFITH, IN 46319

10. Use EPA ID Number

1 N D 0 1 6 3 6 0 2 6 5

G. State Facility's ID

9180890002

H. Facility's Phone

312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

a. **WASTE 1,1,1, TRICHLOROMETHANE**

ORM-A UN2831

12. Containers

No.

Type

13. Total
Quantity

14. Unit
Wt/Vol.

15. Waste No.

0 0 4 D M 0 0 2 2 0 G

F001

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

G-GALLONS

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Signature

Month Day Year
11 1 89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

JOSEPH L. KOONINJA

Signature

Joseph L Kooninja

Month Day Year
04 11 89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year
14 13 89

19. Discrepancy Indication Space

20. Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name

STEVE KULAVICH

Signature

Steve Kulavich

Month Day Year
14 13 89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0315919

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101346
1 7

Authorization Number 9 9 7 1 0 1
8 13

Miles Laboratories (Company Name)
Kankakee City
195 W. Birch St. Address
IL State 60901 Zip

0 9 1 0 5 5 0 0 0 8
14 Generator Number 24

WASTE HAULER(S)

(1) Kankakee Industrial Disposal Hauler Name
1360 E. Locust Hauler Address
S.W.H. Registration Number 0 0 6 6 0 10
25 31

(2) Hauler Name Hauler Address
S.W.H. Registration Number 32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service (Facility Name)
Griffith City
Colfax Ave. & C&O R.R. Address
Indiana State 46319 Zip
9 1 8 0 8 9 0 2
39 Site Number 46

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/22/80

General Partners, LLC
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000
47 52

1 GALLONS (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) R.W. Miller
(Authorized Signature)

DATE: 2/22/80
54 59

(2) J
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Jim Muzny
(Authorized Signature)

DATE: 2/22/80
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

00-0185

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101347

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

City

State

Zip

0910550008

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0066010

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

(Facility Name)

Address

Griffith

Indiana

46319

City

State

Zip

91808902

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/28/80

General Barber
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS
2 CO. TBS.

(Circle One)

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) R.W. Miller

(Authorized Signature)

DATE: 2/28/80

(2) _____

(Authorized Signature)

DATE: ____/____/____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.

R.W. Miller
(Authorized Signature)

DATE: 2/28/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

00-00186

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101348
1 7

Authorization Number 9 9 7 1 0 1
8 13

Miles Laboratories, Inc.

195 W. Birch St.

(Company Name)
Kankakee

Address

IL

60901

City

State

Zip

0 9 1 0 5 5 0 0 8
14 Generator Number 24

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0 0 6 6 0 1 0
25 31

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number _____
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

(Facility Name)

Address

9 1 8 0 8 9 0 2
39 Site Number 46

Griffith

Indiana

46319

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/10/80

Jenna Barber
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2500
47 52

GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) Jenna Barber
(Authorized Signature)

DATE: 3/10/80
34 39

(2) _____
(Authorized Signature)

DATE: ____/____/____
40 45

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Amesbury
(Authorized Signature)

DATE: 3/10/80
46 51

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782 3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424 3802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

00-0191

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101349

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)
Kankakee

Address
IL 60901

0910550008
Generator Number

City

State

Zip

WASTE HAULER(S)

(1) Kankakee Industrial Disposal 1360 E. Locust
Hauler Name Hauler Address

S.W.H. Registration Number 0066010

(2) Hauler Name Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service Colfax Ave. & C&N R.R.

91808902
Site Number

(Facility Name)

Address

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/12/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 3/12/80

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE: 3/12/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000190

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101350
1 7

Authorization Number 997101
8 13

Miles Laboratories

(Company Name)
Kankakee

City

195 W. Birch St.

Address

IL

State

60901

Zip

0910550008
14 Generator Number 24

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

Hauler Name

1360 E. Locust

Hauler Address

S.W.H. Registration Number 0066010
25 31

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

(Facility Name)

Colfax Ave. & C&O R.R.

Address

91808902
39 Site Number 46

Griffith

City

Indiana

State

46319

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/19/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

47 52

1 GALLONS (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE: 3/19/80
54 59

(2)

(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

DATE: / /

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424 3802

DISTRIBUTION: PART 1 GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

SITE COPY - PART 3

0000101

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101351
7

Authorization Number 997101
8 13

Miles Laboratories
(Company Name)
Kankakee
City
195 W. Birch St.
Address
IL 60901
State Zip

0910550008
14 Generator Number 24

WASTE HAULER(S)

(1) Kankakee Industrial Disposal
Hauler Name
1360 E. Locust
Hauler Address

S.W.H. Registration Number 0066010
25 31

(2)
Hauler Name
Hauler Address

S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service
(Facility Name)
Griffith
City
Colfax Ave. & C&D R.R.
Address
Indiana 46319
State Zip

91808902
39 Site Number 46

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/26/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Frank Singleton
(Authorized Signature)

DATE: 03/26/80
54 59

(2)
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Frank Singleton
(Authorized Signature)

DATE: 3/26/80
54 59

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART 1 GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

SITE COPY - PART 3

0000107

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101352

Miles Laboratories, Inc.

195 W. Birch St.

Authorization Number 997101

(Company Name)

Address

0910550008

Kankakee

IL

60901

Generator Number

City

State

Zip

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

S.W.H. Registration Number 0066010

Hauler Name

Hauler Address

25

31

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

32

38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

91808902

(Facility Name)

Address

39

Site Number

46

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/7/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1)

(Authorized Signature)

DATE: 4/7/80

(2)

(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE: 4/7/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS. 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS. 800 / 424-8302

DISTRIBUTION. PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000001

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101353

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

City

State

Zip

0910550008
Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0066010

(2) _____
Hauler Name

Hauler Address

S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

(Facility Name)

Address

91808902
Site Number

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/9/80

Genora Barber
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2900
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1 52

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Don (H101)*
(Authorized Signature)

DATE: 4/9/80

(2) _____
(Authorized Signature)

DATE: ____/____/____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Bob Mauch
(Authorized Signature)

DATE: 4/9/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000202

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101354
1 7

Authorization Number 9 9 7 1 0 1
8 13

Miles Laboratories

195 W. Birch St.

(Company Name)
Kankakee

Address

IL

60901

City

State

Zip

0 9 1 0 5 5 0 0 0 8

Generator Number

6
24

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number

0 0 6 6 0 1 0

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

(Facility Name)

Address

9 1 8 0 8 9 0 2

Site Number

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE:

Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE:

4/14/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED

3000

1 GALLONS
2 CU. YDS.

(Circle One)

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE:

04/14/80

(2)

(Authorized Signature)

DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

DATE:

4/14/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-3302

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000005

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101355

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)
Kankakee

Address

IL

60901

City

State

Zip

0910550008
Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

S.W.H. Registration Number 0066010

Hauler Name

Hauler Address

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

91808902

(Facility Name)
Griffith

Address

IN

46319

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/16/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1)

(Authorized Signature)

DATE: 4/16/80

(2)

(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

DATE: 4/16/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000206

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101356

Miles Laboratories

195 W. Birch St.

(Company Name)
Kankakee

IL

Address

60901

City

State

Zip

Authorization Number

997101

0910550008

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

S.W.H. Registration Number

0066010

Hauler Name

Hauler Address

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

91808902

(Facility Name)

Address

Site Number

Griffith

IN

46319

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE:

Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE:

4/21/80

(Authorized Signature)

WASTE HAULER* QUANTITY OF WASTE RECEIVED:

3000

1 GALLON

(Circle One)

2 CU. YDS.

53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

Don (HID)

(Authorized Signature)

DATE:

4/21/80

(2)

(Authorized Signature)

DATE:

/ /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

J. D. Dyer

(Authorized Signature)

DATE:

4/21/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101357
1 7

Authorization Number 9 9 7 1 0 1
8 13

Miles Laboratories

195 W. Birch St.

(Company Name)
Kankakee

Address

IL

60901

City

State

Zip

0 9 1 0 5 5 0 0 0 8
14 Generator Number 24

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

S.W.H. Registration Number 0 0 6 6 0 1 0
25 31

Hauler Name

Hauler Address

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number
32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

9 1 8 0 8 9 0 2
39 Site Number 40

(Facility Name)
Griffith

Address

IN

46319

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/24/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3 0 0 0
47 52

GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 4 / 24 / 80
54 59

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

DATE: 4 / 24 / 80
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000200

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101358

Authorization Number 9 9 7 1 0 1

Miles Laboratories

195 W. Birch St.

(Company Name)

Kankakee

Address

IL

60901

City

State

Zip

0 9 1 0 5 5 0 0 0 8
Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0 0 6 6 0 1 0

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

(Facility Name)

Griffith

Address

IN

46319

City

State

Zip

9 1 8 0 8 9 0 2

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/28/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3 0 0 0

GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Dim (410)
(Authorized Signature)

DATE: 4/28/80

(2)
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE: 4/28/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8302

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101359

997101

Authorization Number 8 13

Miles Laboratories

195 W. Birch St.

(Company Name)
Kankakee

IL Address 60901

0910550008

Generator Number 14 24

City

State

Zip

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

S.W.H. Registration Number 0066 010

Hauler Name

Hauler Address

25

31

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

32

36

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

91808902

(Facility Name)

Address

39

Site Number

44

Griffith

IN

46319

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/30/80

General Barker
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2500

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Dan Hild
(Authorized Signature)

DATE: 4/30/80

(2)
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Bob M...
(Authorized Signature)

DATE: 4/30/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION. PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000212

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
- WASTE GENERATOR

0101360

Authorization Number 997101

Miles Laboratories

(Company Name)

Kankakee

City

195 W. Birch St.

Address

IL

State

60901

Zip

0910550008

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

Hauler Name

1360 E. Locust

Hauler Address

S.W.H. Registration Number 0066010

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

(Facility Name)

Griffith

City

Colfax Ave. & C&O R.R.

Address

Indiana

State

46319

Zip

91808902

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE

5/14/80

(Authorized Signature)

James Barber

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE 5/14/80

(2)

(Authorized Signature)

DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE 5/14/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART 1 GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

SITE COPY - PART 3

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101361

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)
Kankakee

IL

60901

0910550008

Generator Number

City

State

Zip

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

Hauler Name

Hauler Address

S.W.H. Registration Number 00000010

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

91808902

(Facility Name)

Address

Site Number

Griffith

IN

46319

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS.

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE

5/19/80

(Authorized Signature)

Jensen Barber

WASTE HAULER*

QUANTITY OF WASTE RECEIVED:

3000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

R.W. Miller

(Authorized Signature)

DATE: 5/19/80

(2)

(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

J. Dumbfee

DATE: 5/19/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000169

BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101362
1 7

Authorization Number 9 9 7 1 0 1
8 13

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

City

State

Zip

0 9 1 0 5 5 0 0 0 8
14 Generator Number 24

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0 0 6 6 0 1 0
25 31

(2) _____
Hauler Name

Hauler Address

S.W.H. Registration Number _____
32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

(Facility Name)

Address

Griffith

Indiana

46319

City

State

Zip

9 1 8 0 8 9 0 2
39 Site Number 46

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/21/80

James Barber
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) _____
(Authorized Signature)

DATE: 5/21/80
34 39

(2) _____
(Authorized Signature)

DATE: _____
34 39

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

_____ (Authorized Signature)

DATE: _____
34 39

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101363

Miles Laboratories

195 W. Birch St.

(Company Name)

Kankakee

City

Address

IL

State

60901

Zip

Registration Number 997101

0910550008

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number

0066010

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

(Facility Name)

Griffith

City

Address

IN

State

46319

Zip

91808902

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE:

Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/3/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED:

300

1 GALLONS

(Circle One)

2 CU. YDS.

1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE:

6/3/80

(2)

(Authorized Signature)

DATE:

6/3/80

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

DATE:

6/3/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000165

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101364

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)
Kankakee

Address

IL

State

Zip

WASTE HAULER(S)

8910550008

Generator Number

(1) Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0066

25

31

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

32

38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

(Facility Name)

Griffith

Address

IN

State

46319

Zip

91808902

39

Site Number

46

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/5/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED:

3000

1 GALLONS

(Circle One)

2 CO. TONS

1

53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 6/5/80

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE: 6/5/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000166

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101365

Miles Laboratories

195 W. Birch St.

Authorization Number 997101

(Company Name)
Kankakee

Address

IL

60901

0910550008
Generator Number

City

State

Zip

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

S.W.H. Registration Number 0066-010

Hauler Name

Hauler Address

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

91808902

(Facility Name)

Address

Griffith

IN

46319

Site Number

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/9/80

Jennifer Barber
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CO. TOS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE: 6/9/80

(2)

(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

DATE: 6/9/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000160

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

Reclaim 0101366
Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)
Kankakee

Address

IL

60901

City

State

Zip

0910550008
Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

S.W.H. Registration Number 0066 010

Hauler Name

Hauler Address

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

91808902

(Facility Name)

Address

Griffith

IN

46319

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/11/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED:

3000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) R.W. Miller
(Authorized Signature)

DATE: 6/11/80

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

X (Authorized Signature)

DATE: 6/11/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-3802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000102

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101367

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

City

State

Zip

0910550008

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0066

(2)

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

(Facility Name)

Address

Griffith

IN

46319

City

State

Zip

91808902

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/17/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 6/17/80

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE: 6/17/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000161

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101368
7

Authorization Number 997101
8 13

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

City

State

Zip

0910550008
14 24
Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0066010
25 31

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

(Facility Name)

Address

Griffith

IN

46319

City

State

Zip

91808902
39 46
Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/19/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED:

47

52

53

GALLONS (Circle One)
CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE: 6/19/80
54 59

(2)

(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE: 6/19/80
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000150

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101369

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

City

State

Zip

0910550008

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0066010

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C & O R.R.

(Facility Name)

Address

Griffith

IN

46319

City

State

Zip

91808902

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/25/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 6/25/80

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

DATE: 6/25/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000139

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101370
1 7

Authorization Number 997101
8 13

Miles Laboratories

(Company Name)

Kankakee

City

195 W. Birch St.

Address

IL

State

60901

Zip

0910550008

14

Generator Number

24

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

Hauler Name

1360 E. Locust

Hauler Address

S.W.H. Registration Number 0066 010
25 31

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

(Facility Name)

Griffith

City

Colfax Ave. & C & O R.R.

Address

IN

State

46319

Zip

91808902
39 Site Number 46

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/30/80 7/1/80

James Barber
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED:

3000
52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)

DATE: 7/1/80
54 59

(2) [Signature]
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[Signature]
(Authorized Signature)

DATE: 7/1/80
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000156

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST

0101371

WASTE GENERATOR

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

City

State

Zip

0910550008

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0066010

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C & O R.R.

(Facility Name)

Address

Griffith

IN

46319

City

State

Zip

91808902

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION.

DATE: 7/7/80

Jennifer Barber
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

[Signature]
(Authorized Signature)

DATE: 7/7/80

(2)

[Signature]
(Authorized Signature)

DATE: 7/7/80

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[Signature]
(Authorized Signature)

DATE: 7/7/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8302

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101372

Miles Laboratories

(Company Name)

Kankakee

City

195 W. Birch St.

Address

IL

State

60901

Zip

Authorization Number 997101

0910550008

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

Hauler Name

1360 E. Locust

Hauler Address

S.W.H. Registration Number 0066010

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

(Facility Name)

Colfax Ave. & C&O R.R.

Address

Griffith

City

IN

State

46319

Zip

91808902

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/9/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) (Authorized Signature)

DATE: 7, 9, 80

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE: 7, 9, 80

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-3302

DISTRIBUTION: PART 1 GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

SITE COPY - PART 3

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101373

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)
Kankakee

Address

IL

60901

0910550008

Generator Number

City

State

Zip

WASTE HAULER(S)

(1) **Kankakee Industrial Disposal**

1360 E. Locust

S.W.H. Registration Number **0066010**

Hauler Name

Hauler Address

(2) _____
Hauler Name

Hauler Address

S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

91808902

(Facility Name)

Address

Griffith

IN

46319

City

State

Zip

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: **Acetone & Contaminates**

WASTE PHASE: **Liquid**
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: **7/15/80**

Genora Barber
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: **3000**

1 GALLONS (Circle One)
2 CU. YDS. **1**

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) **Phil Harris**
(Authorized Signature)

DATE: **7/15/80**

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

W. Dunfee
(Authorized Signature)

DATE: **7/15/80**

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000150

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101374

Miles Laboratories

(Company Name)

Kankakee

City

195 W. Birch St.

Address

IL

State

60901

Zip

Authorization Number 997101

0910550008

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

Hauler Name

1360 E. Locust

Hauler Address

S.W.H. Registration Number 0066010

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

(Facility Name)

Griffith

City

Colfax Ave. & C&O R.R.

Address

IN

State

46319

Zip

91808902

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/17/80

Genora Barber, Inc.
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

GALLONS (Circle One)
CO. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 7/17/80

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE: 7/17/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-3892

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

00-0119

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101375

Miles Laboratories

195 W. Birch St.

Authorization Number 997101

(Company Name)
Kankakee

Address

IL

60901

0910550008

Generator Number

City

State

Zip

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

S.W.H. Registration Number 0066

Hauler Name

Hauler Address

25 31

(2) _____

Hauler Address

S.W.H. Registration Number

32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

91808902

(Facility Name)

Address

Griffith

IN

46219

City

State

Zip

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/22/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) George Krid

(Authorized Signature)

DATE: 7/22/80

(2) _____

(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE: 7/22/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART 1 GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

SITE COPY - PART 3

0000118

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101376

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

City

State

Zip

0910550008

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

0066010

25

31

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

32

38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

(Facility Name)

Address

Griffith

IN

46319

City

State

Zip

91808902

39

Site Number

46

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/24/80

Jenna Barber
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

47

52

1 GALLONS (Circle One)
2 CO. TOS 1

53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE: 7/24/80

54

59

(2)

(Authorized Signature)

DATE: / /

55

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE: 7/24/80

60

65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000117

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101377

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

0910550008

Generator Number

City

State

Zip

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0066010

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

(Facility Name)

Address

Griffith

IN

46319

91808902

Site Number

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/28/80

Jenora Dwyer
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Don
(Authorized Signature)

DATE: 7/28/80

(2)
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

DATE: 7/28/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000116

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101378

Miles Laboratories

(Company Name)

Kankakee

City

195 W. Birch St.

Address

IL

State

60901

Zip

Authorization Number 997101

0910550008

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

Hauler Name

1360 E. Locust

Hauler Address

S.W.H. Registration Number 0066010

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL, STORAGE OR TREATMENT SITE

American Chemical Service

(Facility Name)

Griffith

City

Colfax Ave. & C&O R.R.

Address

IN

State

46319

Zip

91808902

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/30/80

Jenora Barber
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) L.W. Miller
(Authorized Signature)

DATE: 7/30/80

(2)
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

7/30/80
(Authorized Signature)

DATE: 7/30/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000115

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101379

Authorization Number 9 9 7 1 0 1

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

City

State

Zip

0 9 1 0 5 5 0 0 0 8
Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0 0 6 6 0 1 0

(2) _____
Hauler Name

Hauler Address

S.W.H. Registration Number _____

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

(Facility Name)

Address

Griffith

IN

46319

City

State

Zip

9 1 8 0 8 9 0 2
Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/4/80

Jenna Barber
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3 000

GALLONS (Circle One)
2 CO. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) _____
(Authorized Signature)

DATE: 8/4/80

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

OR SPECIAL INSTRUCTIONS

DATE: 8/4/80

3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS 800 / 424-8802

GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

Y - PART 3

0000111

BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0101380

997101

Miles Laboratories

(Company Name)

Kankakee

City

195 W. Birch St.

Address

IL

State

60901

Zip

0910550008

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

Hauler Name

1360 E. Locust

Hauler Address

S.W.H. Registration Number 0066010

25

31

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

32

38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

(Facility Name)

Griffith

City

Colfax Ave. & C&O R.R.

Address

IN

State

46319

Zip

91808902

Site Number

46

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE:

8/6/80

Jenora Barber
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED:

3000

GALLONS
2 CU. YDS.

(Circle One)

1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1)

(Authorized Signature)

DATE:

8/6/80

(2)

(Authorized Signature)

DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

J. Dunfee
(Authorized Signature)

DATE:

8/6/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-6302

DISTRIBUTION: PART 1 GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

SITE COPY - PART 3

0000113

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0131454
7

Authorization Number 997101
8 13

Miles Laboratories

(Company Name)

Kankakee

City

195 W. Birch St.

Address

IL

State

60901

Zip

0910550008 G
14 Generator Number 24

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

Hauler Name

1360 E. Locust

Hauler Address

S.W.H. Registration Number 0066010
25 31

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL, STORAGE OR TREATMENT SITE

American Chemical Service

(Facility Name)

Colfax Ave. & C & O R.R.

Address

91808902
39 Site Number 46

Griffith

City

IN

State

46319

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/12/80

James Barker
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 00 000 1
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

[Signature]
(Authorized Signature)

DATE: 8/12/80
59

(2)

[Signature]
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[Signature]
(Authorized Signature)

DATE: / /
80 85

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART 1 GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

SITE COPY - PART 3

0000112

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0131455

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

City

State

Zip

Generator Number 0910550008

G
24

WASTE HAULER(S)

(1) **Kankakee Industrial Disposal**

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0066010

25

31

(2) _____
Hauler Name

Hauler Address

S.W.H. Registration Number _____

32

38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C & O R.R.

(Facility Name)

Address

Griffith

IN

46319

City

State

Zip

Site Number 91808902

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: **Acetone & Contaminates**

WASTE PHASE: **Liquid**
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/14/80

Jenna Barber
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

(Circle One)
1 GALLONS
2 CU YDS
1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *[Signature]*
(Authorized Signature)

DATE: 8/14/80

(2) *[Signature]*
(Authorized Signature)

DATE: 8/14/80

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

[Signature]
(Authorized Signature)

DATE: 8/14/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

00-0139

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0131456

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)

Kankakee

City

IL

State

60901

Zip

0910550008

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

Hauler Name

1360 E. Locust

Hauler Address

S.W.H. Registration Number 0066010

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Facility Name

Colfax Ave. & C & O R.R.

Address

91808902

Site Number

Griffith

City

IN

State

46319

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE

Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS.

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/18/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED

3000

GALLONS

(Circle One)

METHOD OF SHIPMENT, (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE

8-18-80

(2)

(Authorized Signature)

DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

DATE

8-18-80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS 800 / 424-3202

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000135

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0131457

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

Generator Number 0910550008

City

State

Zip

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

S.W.H. Registration Number 0066010

Hauler Name

Hauler Address

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C & O R.R.

91808902

(Facility Name)

Address

Griffith

IN

46319

Site Number

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/20/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 8/20/80

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE: 8/20/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000137

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0131458

Authorization Number 997101

Miles Laboratories

(Company Name)

195 W. Birch St.

Address

Kankakee

City

IL

State

60901

Zip

0910550008

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

Hauler Name

1360 E. Locust

Hauler Address

S.W.H. Registration Number 0066010

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

(Facility Name)

Colfax Ave. & C & O R.R.

Address

91808902

Site Number

Griffith

City

IN

State

46319

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/26/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 8/28/80

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE: 8/28/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000136

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0131459

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)
Kankakee

Address

IL

60901

0910550008

City

State

Zip

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

S.W.H. Registration Number 0066010

Hauler Name

Hauler Address

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C & O R.R.

91808902

(Facility Name)

Address

Griffith

IN

46319

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 8/28/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED:

3000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) F.W. Miller

(Authorized Signature)

DATE: 8/28/80

(2)

(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE: 8/28/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424 2802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000135

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0131460
1 7

Miles Laboratories
(Company Name)
Kankakee
City

195 W. Birch St.
Address
IL 60901
State Zip

Authorization Number 997101
13

0910550008 G
14 Generator Number 24

WASTE HAULER(S)

(1) Kankakee Industrial Disposal 1360 E. Locust
Hauler Name Hauler Address

S.W.H. Registration Number 0066010
25 31

(2) _____
Hauler Name Hauler Address

S.W.H. Registration Number _____
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service Colfax Ave. & C & O R.R.
(Facility Name) Address
Griffith IN 46319
City State Zip

91808902
39 Site Number 46

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9/2/80

Jenora Barber
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3,000
47 52

3,000 (Circle One)
1 GALLONS
2 CU. YDS.
31

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) K. D. Geary
(Authorized Signature)

DATE: 9-2-80

(2) _____
(Authorized Signature)

DATE: ____/____/____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

B. J. Munch
(Authorized Signature)

DATE: ____/____/____
60 63

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000131

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0137405

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

City

State

Zip

0910550008
Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal 1360 E. Locust
Hauler Name Hauler Address

S.W.H. Registration Number 0066010

(2) Hauler Name Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C & O R.R.

91808902
Site Number

(Facility Name)

Address

Griffith

Indiana

46319

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone and Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/4/80

Jenora Barber /lc
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED:

2500
GALLONS (Circle One)
CO. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) L.W. Miller
(Authorized Signature)

DATE: 01/04/80

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Ala. H. Hester
(Authorized Signature)

DATE: 1-4-80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART 1 GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

SITE COPY - PART 3

00-0150

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0137406

Authorization Number 997101

Miles Laboratories

(Company Name)

Kankakee

City

195 W. Birch St.

Address

IL

State

60901

Zip

0910550008

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

Hauler Name

1360 E. Locust

Hauler Address

S.W.H. Registration Number 0066010

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

(Facility Name)

Colfax Ave. & C&O R.R.

Address

Griffith

City

Indiana

State

46319

Zip

91808902

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/17/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CIL YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) (Authorized Signature)

DATE: 01/17/80

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

DATE: 1/17/80

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART 1 GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

SITE COPY - PART 3

0000170

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0137407

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

City

State

Zip

0910550008

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

S.W.H. Registration Number 0066010

Hauler Name

Hauler Address

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

91808902

(Facility Name)

Address

Griffith

IN

46319

City

State

Zip

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/23/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

GALLONS (Circle One)
CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1)

(Authorized Signature)

DATE: 1/23/80

(2)

(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE: / /

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART 1 GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

SITE COPY - PART 3

0000175

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0137408
1 7

Authorization Number 997101
8 13

Miles Laboratories

(Company Name)

195 W. Birch St.

Address

Kankakee

City

IL

State

60901

Zip

0910550008
14 24
Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

Hauler Name

1360 E. Locust

Hauler Address

S.W.H. Registration Number 0066010
25 31

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

(Facility Name)

Colfax Ave. & C&O R.R.

Address

Griffith

City

Indiana

State

46319

Zip

91808902
39 46
Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/25/80

Jenior Barber
(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED:

3000
52

1 GALLONS (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

Don (K10)
(Authorized Signature)

DATE: 1/25/80
54 59

(2)

(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.

(Authorized Signature)

DATE: 1/25/80
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000176

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0137409

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

City

State

Zip

0910550008
Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

S.W.H. Registration Number 0066010

Hauler Name

Hauler Address

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C & O R.R.

91808902

(Facility Name)

Address

Griffith

Indiana

46319

City

State

Zip

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/30/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) R. W. Miller

DATE: 1/30/80

(2)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Bob Mauck

DATE: 1/30/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000140

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0137410
1 7

Authorization Number 997101
8 13

Miles Laboratories 195 W. Birch St.
(Company Name) Address
Kankakee IL 60901
City State Zip

0910550008
14 Generator Number 24

WASTE HAULER(S)

(1) Kankakee Industrial Disposal 1360 E. Locust
Hauler Name Hauler Address

S.W.H. Registration Number 0066010
25 31

(2) _____
Hauler Name Hauler Address

S.W.H. Registration Number _____
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service Colfax Ave. & C & O R.R.
(Facility Name) Address
Griffith Indiana 46319
City State Zip

91808902
39 Site Number 46

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/1/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000
47 52

1 GALLONS (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER _____ (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) R.W. Miller
(Authorized Signature)

DATE: 2/1/80
54 59

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

Bob March
(Authorized Signature)

DATE: 2/1/80
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 - 424 2862

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000179

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0137411

Miles Laboratories

(Company Name)

Kankakee

City

195 W. Birch St.

Address

IL

State

60901

Zip

Authorization Number 997101

0910550008

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

Hauler Name

1360 E. Locust

Hauler Address

S.W.H. Registration Number 0066010

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

(Facility Name)

Colfax Ave. & C&O R.R.

Address

Griffith

City

Indiana

State

46319

Zip

91808902

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME:

Acetone & Contaminates

WASTE PHASE:

Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE:

2/10/70

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED:

2500

1 GALLONS
2 CU. YDS.

(Circle One)

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER

(Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE: 2/10/70

(2)

(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE: 2/6/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART 1 GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

SITE COPY - PART 3

0000178

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0137412

Authorization Number 9 9 7 1 0 1

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

City

State

Zip

0 9 1 0 5 5 0 0 0 8

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0 0 6 6 0 1 0

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

(Facility Name)

Address

9 1 8 0 8 9 0 2

Site Number

Griffith

Indiana

46319

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone and Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/8/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) (Authorized Signature)

DATE: 2/8/80

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE: 2/8/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000181

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0137413

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

City

State

Zip

0910550008

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0066010

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

(Facility Name)

Address

91808902

Griffith

Indiana

46319

City

State

Zip

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone and Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/13/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 3000

1 GALLONS (Circle One)
2 CO. 106

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Signature)
(Authorized Signature)

DATE: 2/13/80

(2) (Signature)
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

DATE: / /

(Signature)
(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-3802

DISTRIBUTION: PART 1 GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

SITE COPY - PART 3

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0137414
1 7

Authorization Number 997101
8 13

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

City

State

Zip

0910550008
14 24
Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0066010
25 31

(2)

Hauler Name

Hauler Address

S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

(Facility Name)

Address

91808902
39 46
Site Number

Griffith

Indiana

46319

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/15/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED:

3000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE: 2/15/80
54 59

(2)

(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.

(Authorized Signature)

DATE: 2/15/80
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART 1 GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

SITE COPY - PART 3

0000153

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0137415

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

City

State

Zip

0910550008

Generator Number

WASTE HAULER(S)

(1) Kankakee Industrial Disposal 1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0066010

(2) Hauler Name Hauler Address

S.W.H. Registration Number 32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C&O R.R.

(Facility Name)

Address

Griffith

Indiana

46319

City

State

Zip

91808902

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE-WRITTEN INFORMATION

DATE: 2/20/80

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 2600

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Signature) (Authorized Signature)

DATE: 2/22/80

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED.

(Signature) (Authorized Signature)

DATE: 2/20/80

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000019

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0234502

Miles Laboratories

195 W. Birch St.

(Company Name)
Kankakee

Address

IL

60901

City

State

Zip

Authorization Number 997101

0910550008 G
Generator Number

Kankakee Industrial Disposal

WASTE HAULER(S)
1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C & O R.R.

(Facility Name)

Address

Griffith

IN

46319

City

State

Zip

91808902

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME:

Acetone & Contaminates

WASTE PHASE:

Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR
D.O.T. USE

38,800

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED:

5000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE:

9/8/80

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE: 9/8/80

(2)

(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 9/8/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000132

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0234503

Miles Laboratories

(Company Name)

Kankakee

City

195 W. Birch St.

Address

IL

State

60901

Zip

Authorization Number 997101

Generator Number 0910550008

Kankakee Industrial Disposal

Hauler Name

1360 E. Locust

Hauler Address

S.W.H. Registration Number 00660000

S.W.H. Registration Number 32

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

(Facility Name)

Griffith

City

Colfax Ave. & C & O R.R.

Address

IN

State

46319

Zip

91808902

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.O.T. USE LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (Circle One)

CO. TONS 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9/11/80

Jenora Barber
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE: 09/11/80

(2)

(Authorized Signature)

DATE: 1/1/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

DATE: 9/11/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000130

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0234501

Authorization Number 997101

Miles Laboratories

(Company Name)

Kankakee

City

195 W. Birch St.

Address

IL

State

60901

Zip

0910550008

Generator Number

Kankakee Industrial Disposal

Hauler Name

1360 E. Locust

Hauler Address

S.W.H. Registration Number

0066848

S.W.H. Registration Number

American Chemical Service

(Facility Name)

Griffith

City

Colfax Ave. & C & O R.R.

Address

IN

State

46319

Zip

91808902

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE

Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR
D.O.T. USE

35700 LBS
TUNS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED:

5000

1 GALLONS (Circle One)
CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE:

9/16/80

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE:

9/15/80

(2)

(Authorized Signature)

DATE:

9/16/80

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE:

9/16/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000129

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0234505

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

Generator Number 0910550008

City

State

Zip

Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0066888

Hauler Name

Hauler Address

S.W.H. Registration Number 012

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C & O R.R.

(Facility Name)

Address

Site Number 91808902

Griffith

IN

46319

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.O.T. USE 35,640 LBS.
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS Circle One
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9/19/80

General Barber
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

Mark Anglin
(Authorized Signature)

DATE: 09 19 80

(2)

[Signature]
(Authorized Signature)

DATE: 1 1 1

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 9/19/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

- *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000124

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0234506

Authorization Number 997101

Miles Laboratories

195 W. Birch St.

(Company Name)

Address

Kankakee

IL

60901

City

State

Zip

0910550008

Generator Number

Kankakee Industrial Disposal

1360 E. Locust

Hauler Name

Hauler Address

S.W.H. Registration Number 0066010

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C & A R.R.

(Facility Name)

Address

Griffith

IN

46319

City

State

Zip

91808902

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED:

3000

1 GALLONS (Circle One)

CO. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE:

9/23/80

(Authorized Signature)

Jenora Barber

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE:

9/23/80

(2)

(Authorized Signature)

DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE:

9/23/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

- 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS -

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000125

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0234507

Miles Laboratories

(Company Name)

Kankakee

City

195 W. Birch St.

Address

IL

State

60901

Zip

Authorization Number 997101

0910550008

Generator Number

Kankakee Industrial Disposal

Hauler Name

1360 E. Locust

Hauler Address

S.W.H. Registration Number 0066812

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

(Facility Name)

Griffith

City

Colfax Ave. & C & O R.R.

Address

IN

State

46319

Zip

91808902

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION:

HAZARD CLASS

Flammable

3

WEIGHT FOR D.O.T. USE 39000 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000

GALLONS (Circle One)
CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9/26/80

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 9/26/80

(2) (Authorized Signature)

DATE: 9/26/80

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 9/26/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000126

BY
ATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-3760

0234508

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997101

MILES LABORATORIES

(Company Name)

KANKAKEE

City

195 W. BIRCH ST.

Address

IL

State

60901

Zip

0910550008

Generator Number

6

24

KANKAKEE INDUSTRIAL DISPOSAL

Hauler Name

1360 E. LOCUST

Hauler Address

S.W.H. Registration Number

0066012

25

31

S.W.H. Registration Number

32

38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

GRIFFITH

City

COLFAX AVE. & C & O R.R.

Address

IN

State

46319

Zip

91808902

Site Number

46

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE

LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS

WEIGHT FOR
D.O.T. USE

35,420

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED:

5000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE:

10/2/80

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE:

10/02/80

(2)

(Authorized Signature)

DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE

YES

NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE:

10/1/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

** 24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS *

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000127

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0234509

MILES LABORATORIES

195 W. BIRCH ST.

(Company Name)
KANKAKEE

Address

IL

60901

City

State

Zip

Authorization Number 9 9 7 1 0 1

0 9 1 0 5 5 0 0 0 8

Generator Number

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

WASTE HAULER(S)

S.W.H. Registration Number 0 0 6 6 0 1 2

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O'R.R.

9 1 8 0 8 9 0 2

(Facility Name)

Address

GRIFFITH

IN

46319

City

State

Zip

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME ACETONE & CONTAMINATES

WASTE PHASE LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS

WEIGHT FOR D.O.T. USE 37,000 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10/10/80

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) K. W. Miller
(Authorized Signature)

DATE: 10/10/80

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 10/10/80

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000121

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0234510

MILES LABORATORIES

(Company Name)
KANKAKEE

City

195 W. BIRCH ST.

Address

IL

State

60901

Zip

Authorization Number 997101

0910550008

Generator Number

KANKAKEE INDUSTRIAL DISPOSAL

Hauler Name

1360 E. LOCUST

Hauler Address

S.W.H. Registration Number 0066012

S.W.H. Registration Number

AMERICAN CHEMICAL SERVICE

(Facility Name)

COLFAX AVE. & C & O R.R.

Address

GRIFFITH

IN

46319

City

State

Zip

91808902

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME ACETONE & CONTAMINATES

WASTE PHASE

LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION

HAZARD CLASS

WEIGHT FOR
D.O.T. USE

37,160

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED:

5000

GALLONS (Circle One)
CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE

10/27/80

(Authorized Signature)

Jenora Barber

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE: 10/24/80

(2)

(Authorized Signature)

DATE: 10/27/80

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 10/27/80

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000122

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0334058

Authorization Number 9 9 7 1 4 9

MILES LABORATORIES

195 W. BIRCH ST.

(Company Name)
KANKAKEE

Address

IL

60901

City

State

Zip

0 9 1 0 5 5 0 0 0 8 G

Generator Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

S.W.H. Registration Number 0 0 6 6 0 1 2

Hauler Name

Hauler Address

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

9 1 8 0 8 9 0 2

(Facility Name)

Address

39

Site Number

GRIFFITH

IN

46319

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME ACETONE & CONTAMINATES

WASTE PHASE LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.O.T. USE 33,600 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 47 4900 52

1 GALLONS (Circle One)
2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/4/80

Jenora Barber
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Charles Smith*
(Authorized Signature)

DATE: 11 04 80 34 39

(2) _____
(Authorized Signature)

DATE: 11 14 80 34 39

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Frankie
(Authorized Signature)

DATE: 11 14 80 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000119

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

033405

Authorization Number 997149

MILES LABORATORIES

195 W. BIRCH ST.

(Company Name)

Address

KANKAKEE

IL

60901

City

State

Zip

0910550008

Generator Number

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 006601

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

(Facility Name)

Address

GRIFFITH

IN

46319

City

State

Zip

9180890

Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE

WEIGHT FOR D.O.T. USE 38,990 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12/3/80

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE: 12/03/80

(2)

(Authorized Signature)

DATE: 1/1/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 12/3/80

COMMENTS OR SPECIAL INSTRUCTIONS:

To 110 R 12/3/80 CPM T-23

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-2801

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

GENERATOR COPY — PART 1 - DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.

0000309

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0334059

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997149

MILES LABORATORIES

195 W. BIRCH ST.

(Company Name)

Address

KANKAKEE

IL

60901

City

State

Zip

0910550008

Generator Number

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

(Facility Name)

Address

91808902

Site Number

GRIFFITH

IN

46319

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME ACETONE & CONTAMINATES

WASTE PHASE LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE

WEIGHT FOR D.O.T. USE 38,990 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12/3/80

Genora Barber
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Don 4100
(Authorized Signature)

DATE: 12/03/80

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 12/3/80

COMMENTS OR SPECIAL INSTRUCTIONS:

Dumped to 110 TR. 12-3-80

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000310

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0334060

SPECIAL WASTE HAULING MANIFEST

MILES LABORATORIES

195 W. BIRCH ST.

Authorization Number 997149

(Company Name)
KANKAKEE

Address

IL

60901

0910550008

City

State

Zip

Generator Number

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

S.W.H. Registration Number 0066012

Hauler Name

Hauler Address

FEI. IAD074411745

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

GRIFFITH

IN

46319

Site Number

City

State

Zip

TND 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME ACETONE & CONTAMINATES

WASTE PHASE

LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE

WEIGHT FOR D.O.T. USE 37,380 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12/17/80

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE: 12/17/80

(2)

(Authorized Signature)

DATE: 12/17/80

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 12/17/80

COMMENTS OR SPECIAL INSTRUCTIONS:

To 110R-12/17/80 JFM T-13

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000311

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0334061

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997149

ILD048955959

0910550008
Generator Number

MILES LABORATORIES

(Company Name)

KANKAKEE

City

195 W. BIRCH ST.

Address

IL

State

60901

Zip

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

Hauler Name

1360 E. LOCUST

Hauler Address

S.W.H. Registration Number 0066013

ILD074411745

S.W.H. Registration Number 32

Hauler Name

Hauler Address

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

GRIFFITH

City

COLFAX AVE. & C & O R.R.

Address

IN

State

46319

Zip

91808902

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE

WEIGHT FOR D.O.T. USE 41,590 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/13/81

Jenora Barber
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) John M. [Signature]
(Authorized Signature)

DATE: 1/13/81

(2) [Signature]
(Authorized Signature)

DATE: 1/13/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ☐ NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 1/13/81

COMMENTS OR SPECIAL INSTRUCTIONS:

PUMPED 3000 GALS TO #8 STILL T-63
PUMPED 2000 GALS TO 1412 T-63

IN ILLINOIS. 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS. 800 / 424 8872

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000932

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0334062

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997149
I L D O 4 8 9 5 5 9 5 9

MILES LABORATORIES

195 W. BIRCH ST.

(Company Name)

Address

KANKAKEE

IL

60901

City

State

Zip

0910550008

14

Generator Number

24

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

I L D O 7 4 4 1 1 7 4 5

Hauler Name

Hauler Address

S.W.H. Registration Number

32

38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

(Facility Name)

Address

GRIFFITH

IN

46319

City

State

Zip

91808902

39

Site Number

40

I N D O 1 6 3 6 0 2 6 5

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE

WEIGHT FOR
D.O.T. USE

41,560

LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED:

5000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/16/81

U002

Jenora Barber
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Jenora Barber
(Authorized Signature)

DATE: 1/16/81

(2) Jenora Barber
(Authorized Signature)

DATE: 1/16/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Jenora Barber
(Authorized Signature)

DATE: 1/16/81

COMMENTS OR SPECIAL INSTRUCTIONS:

To 1102 1/16/81 T-63 Jenora Barber

IN ILLINOIS 217 / 782 3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424 8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

0000933

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0334063

SPECIAL WASTE HAULING MANIFEST

MILES LABORATORIES

195 W. BIRCH ST.

Authorization Number 997149
ILD048955959¹³

(Company Name)
KANKAKEE

Address

IL

60901

City

State

Zip

0910550008 ¹⁴ ₂₄
Generator Number

KANKAKEE INDUSTRIAL DISPOSAL

WASTE HAULER(S)
1360 E. LOCUST

S.W.H. Registration Number 0066012
²⁵ ₃₁

Hauler Name

Hauler Address

ILD074411745

Hauler Name

Hauler Address

S.W.H. Registration Number
³² ₃₈

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902
³⁹ ₄₆

(Facility Name)
GRIFFITH

Address

IN

46319

City

State

Zip

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE

WEIGHT FOR D.O.T. USE 41,580 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED:
⁴⁷ ₅₂

1 GALLONS (Circle One)
2 CU. YDS. 1
⁵¹ ₅₃

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/26/81

W007 Janora Barber
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)
(Authorized Signature)

DATE: 1/23/81
⁵⁴ ₅₉

(2)
(Authorized Signature)

DATE: 1/27/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

F. Decker
(Authorized Signature)

DATE: 1/27/81
⁶⁰ ₆₅

COMMENTS OR SPECIAL INSTRUCTIONS. To 63E - 1700 GALS.
To #8 STILL 3300 GALS

T-63 1/27/81 Jim Murphy

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424 3802

DISTRIBUTION. PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SHE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000940

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0334064

Authorization Number 997149
ILD048955959
Generator Number 0910550008
₁₄ ₂₄

MILES LABORATORIES
(Company Name)
KANKAKEE
City
195 W. BIRCH ST.
Address
IL
State
60901
Zip

KANKAKEE INDUSTRIAL DISPOSAL
Hauler Name
1360 E. LOCUST
Hauler Address
Hauler Name
Hauler Address

S.W.H. Registration Number 0066012
ILD074411745
S.W.H. Registration Number 32
₂₅ ₃₁ ₃₂ ₃₈

AMERICAN CHEMICAL SERVICE
(Facility Name)
GRIFFITH
City
COLFAX AVE. & C & O R.R.
Address
IN
State
46319
Zip

91808902
Site Number 46
IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE

WEIGHT FOR D.O.T. USE 41,600 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000
₄₇ ₅₂

1 GALLONS (Circle One)
2 CU. YDS. 1
₃₃

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/29/81

John Barber
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) John Barber
(Authorized Signature)
(2) _____
(Authorized Signature)

DATE: 1/29/81
₅₄ ₅₉

DATE: 1/29/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Bob Mauck
(Authorized Signature)

DATE: 1/29/81
₆₀ ₆₅

COMMENTS OR SPECIAL INSTRUCTIONS:

1200 GALS TO G3K
3300 GALS TO #8 STILL

1/29/81 T-63 Jon Murphy

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000939

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0334065

MILES LABORATORIES
(Company Name)
KANKAKEE
City

195 W. BIRCH ST.
Address
IL
State
60901
Zip

Authorization Number 997149
ILD048955959
0910550008
Generator Number

KANKAKEE INDUSTRIAL DISPOSAL
Hauler Name

WASTE HAULER(S)
1360 E. LOCUST
Hauler Address

S.W.H. Registration Number 0066012
ILD074111745
ILD054155080
S.W.H. Registration Number

Hauler Name

Hauler Address

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE
(Facility Name)
GRIFFITH
City

COLFAX AVE. & C & O R.R.
Address
IN
State
46319
Zip

91808902
Site Number
IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE

WEIGHT FOR D.O.T. USE 36,970 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/4/81

Jenora Barber
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Don (410)*
(Authorized Signature)

DATE: 02/04/81

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 2-5-81

COMMENTS OR SPECIAL INSTRUCTIONS

To 110R T-63 2/5/81 Jim Murphy

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000938

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0334066

Authorization Number 997149
1LD048955959
0910550008
Generator Number 14 24

MILES LABORATORIES

195 W. BIRCH ST.

(Company Name)

Address

KANKAKEE

IL

60901

City

State

Zip

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

1LD074411745

1LD054155080

S.W.H. Registration Number 32 38

Hauler Name

Hauler Address

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

(Facility Name)

Address

GRIFFITH

IN

46319

City

State

Zip

91808902
Site Number 39 46

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE

WEIGHT FOR D.O.T. USE 37,400 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/9/81

1007 Janora Brubaker
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Janora Brubaker
(Authorized Signature)

DATE: 02/09/81

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 2/9/81

COMMENTS OR SPECIAL INSTRUCTIONS:

To 121R 2/9/81 T-63 Jim Murphy

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000937

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0334067

Authorization Number 997149¹³

IL D 0 4 8 9 5 5 9 5 9

0910550008¹⁴ Generator Number 24

MILES LABORATORIES

(Company Name)

KANKAKEE

City

195 W. BIRCH ST.

Address

IL

State

60901

Zip

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

Hauler Name

1360 E. LOCUST

Hauler Address

S.W.H. Registration Number 0066013²⁵

IL D 0 5 4 1 5 5 0 8 0

S.W.H. Registration Number 32³⁸

Hauler Name

Hauler Address

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

GRIFFITH

City

COLFAX AVE. & C & O R.R.

Address

IN

State

46319

Zip

91808902³⁹

Site Number 46

IND 0 1 6 3 6 0 2 6 5

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.O.T. USE 41,470 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/12/81

Jenora Barber
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Don (412)
(Authorized Signature)

DATE: 02/12/81⁵⁴

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 2/12/81⁶⁰

COMMENTS OR SPECIAL INSTRUCTIONS:

TO 121R T-63 2/12/81 Jim Murphy

IN ILLINOIS, 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS, 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000936

COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0334068

SPECIAL WASTE HAULING MANIFEST

MILES LABORATORIES

195 W. BIRCH ST.

(Company Name)
KANKAKEE

Address

IL

60901

City

State

Zip

Authorization Number 997149

ILDO48955959

0910550008

Generator Number

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

ILDO54155080

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLEAX AVE. S.C. & O.R.R.

(Facility Name)

Address

GRIFFITH

IN

46319

City

State

Zip

91808902

INDO16360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.O.T. USE 39,680 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/18/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 02/18/81

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 02/18/81

COMMENTS OR SPECIAL INSTRUCTIONS:

TO 110X 2/18/81 T-63 Jim Murphy

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000935

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0334069

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997149

IL D O 4 8 9 5 5 9 5 9

0910550008 G
14 Generator Number 24

MILES LABORATORIES

195 W. BIRCH ST.

(Company Name)

Address

KANKAKEE

IL

60901

City

State

Zip

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

IL D O 5 4 1 5 5 0 8 0

Hauler Name

Hauler Address

S.W.H. Registration Number
32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

(Facility Name)

Address

GRIFFITH

IN

46319

City

State

Zip

91808902
39 Site Number 46

IND O 1 6 3 6 0 2 6 5

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.O.T. USE LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/24/81

Jenna Barber
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)
(Authorized Signature)

DATE: 2/24/81
34 39

(2)
(Authorized Signature)

DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Bob Miller
(Authorized Signature)

DATE: 2/24/81
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

TO 110R 4000 GALS T-63 2/24/81 Jim Murphy
TO 141R 1000 GALS T-63 2/24/81 Jim Murphy

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

• SITE COPY - PART 3

000934

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0334070

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997149
ILDO48955959
Generator Number 0910550008

MILES LABORATORIES 195 W. BIRCH ST.
(Company Name) Address
KANKAKEE IL 60901
City State Zip

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address

S.W.H. Registration Number 0066012
ILDO54155080

Hauler Name Hauler Address

S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R.
(Facility Name) Address
GRIFFITH IN 46319
City State Zip

91808902
Site Number 39 46
IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.O.T. USE LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2/25/81

Jenora Barber
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Geary Kid
(Authorized Signature)

DATE: 2/25/81

(2)
(Authorized Signature)

DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Bob Mauck
(Authorized Signature)

DATE: 2/25/81

COMMENTS OR SPECIAL INSTRUCTIONS:

3400 TO 110E T-63
1600 TO 121E T-63

2/25/81 Jim Murphy

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000941

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

030

MILES LABORATORIES
(Company Name)
KANKAKEE
City
195 W. BIRCH ST.
Address
IL
State
60901
Zip

Authorization Number 997149
13
ILD048955959
0910550008
14 Generator Number 24

KANKAKEE INDUSTRIAL DISPOSAL
Hauler Name
1360 E. LOCUST
Hauler Address
Hauler Name
Hauler Address

S.W.H. Registration Number 0066012
25
ILD054155080
S.W.H. Registration Number 37 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE
(Facility Name)
GRIFFITH
City
COLFAX AVE. & C & O R.R.
Address
IN
State
46319
Zip

91808902
39 Site Number 40
IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.O.T. USE 41,600 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 5000
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/3/81

11,000
Jennifer Barber
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)
(2) (Authorized Signature)

DATE: 3/3/81
54
DATE: 59

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Bob Munch
(Authorized Signature)

DATE: 3/3/81
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

5000 GALS TO NOR T-63 3/3/81 Jim Murphy
~~11,000 GALS TO NOR T-63~~

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

SITE COPY - PART 3

000942

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0334072

MILES LABORATORIES
(Company Name)
KANKAKEE
City
195 W. BIRCH ST.
Address
IL
State
60901
Zip

Authorization Number 997149
ILD048955959
0910550008
Generator Number

KANKAKEE INDUSTRIAL DISPOSAL
Hauler Name
1360 E. LOCUST
Hauler Address

S.W.H. Registration Number 0066012
ILD054155080

Hauler Name Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE
(Facility Name)
COLFAX AVE. & C & O R.R.
Address
GRIFFITH
City
IN
State
46319
Zip

91808902
Site Number
IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.O.T. USE LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (Circle One)
CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/9/81

12007
Jennifer Barber
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Beau Kid
(Authorized Signature)

DATE: 3/9/81

(2)
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Bob Muck
(Authorized Signature)

DATE: 030981

COMMENTS OR SPECIAL INSTRUCTIONS:

TO 110R T-63 3/9/81 Jim Murphy

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000943

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0334073

SPECIAL WASTE HAULING MANIFEST

MILES LABORATORIES

195 W. BIRCH ST.

Authorization Number 997149
I L D O 4 8 9 5 5 9 5 9

(Company Name)

Address

KANKAKEE

IL

60901

City

State

Zip

0910550008
Generator Number

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

S.W.H. Registration Number 0066013
I L D O 5 4 1 5 5 0 8 0

Hauler Name

Hauler Address

Hauler Name

Hauler Address

S.W.H. Registration Number 0066013
I L D O 5 4 1 5 5 0 8 0

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902
Site Number

(Facility Name)

Address

GRIFFITH

IN

46319

City

State

Zip

I N D O 1 6 3 6 0 2 6 5

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.O.T. USE 41,600 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/12/81

Jenora Barber LLC
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)

DATE: 3/12/81

(2) [Signature]
(Authorized Signature)

DATE: 3/12/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 3/12/81

COMMENTS OR SPECIAL INSTRUCTIONS:

TO 110R T-6.3 3/12/81 Jim Murphy

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000944

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0334074

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997149
I L D 0 4 8 9 5 5 9 5 9
0 9 1 0 5 5 0 0 0 8
Generator Number

MILES LABORATORIES

195 W. BIRCH ST.

(Company Name)

Address

KANKAKEE

IL

60901

City

State

Zip

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012
I L D 0 5 4 1 5 5 0 8 0

Hauler Name

Hauler Address

S.W.H. Registration Number 32

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

(Facility Name)

Address

GRIFFITH

IN

46319

City

State

Zip

91808902
Site Number
I N D 0 1 6 3 6 0 2 6 5

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.O.T. USE 39,600 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/18/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) R.W. Miller
(Authorized Signature)

DATE: 3/18/81

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 3/18/81

COMMENTS OR SPECIAL INSTRUCTIONS:

TO 110R T-63 3/18/81 Jim Murphy

ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802

PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000945

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0334075

MILES LABORATORIES
(Company Name)
KANKAKEE
City
195 W. BIRCH ST.
Address
IL
State
60901
Zip

Authorization Number 997149
ILD048955959
0910550008
Generator Number

KANKAKEE INDUSTRIAL DISPOSAL
Hauler Name
1360 E. LOCUST
Hauler Address
Hauler Name
Hauler Address

S.W.H. Registration Number 0066012
ILD054155080
S.W.H. Registration Number

AMERICAN CHEMICAL SERVICE
(Facility Name)
GRIFFITH
City
COLFAX AVE. & C & O R.R.
Address
IN
State
46319
Zip

91808902
Site Number
IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.O.T. USE 41,600 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/24/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 3/24/81

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 3/24/81

COMMENTS OR SPECIAL INSTRUCTIONS:

Pumped to 110K T-63 3/24/81 Jim Murphy

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000946

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0334076

Authorization Number 997149

ILDO48955959¹³

0910550908¹⁴

Generator Number 24

MILES LABORATORIES

(Company Name)

195 W. BIRCH ST.

Address

KANKAKEE

City

IL

State

60901

Zip

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

Hauler Name

1360 E. LOCUST

Hauler Address

S.W.H. Registration Number 006601²⁵

ILDO54155080³¹

S.W.H. Registration Number 32³⁸

Hauler Name

Hauler Address

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

COLFAX AVE. & C & O R.R.

Address

GRIFFITH

City

IN

State

46319

Zip

91808902³⁹

Site Number 46

INDO16360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

WEIGHT FOR D.O.T. USE 38,400 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000⁴⁷

1 GALLONS (Circle One)
2 CU. YDS. 1⁵³

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/26/81

Jenna Barber
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [Signature]
(Authorized Signature)

DATE: 03/26/81⁵⁴

(2) _____
(Authorized Signature)

DATE: _____⁵⁹

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 3/26/81⁶⁰

COMMENTS OR SPECIAL INSTRUCTIONS:

TO 110 E. TOWN TO #7 STILL T-63 3/24/81 Jim Murphy

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000947

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0334077

MILES LABORATORIES
(Company Name)
KANKAKEE
City

195 W. BIRCH ST.
Address
IL
State
60901
Zip

Authorization Number 997149
I L D O 4 8 9 5 5 9 5 9
0910550008
Generator Number

KANKAKEE INDUSTRIAL DISPOSAL
Hauler Name

WASTE HAULER(S)
1360 E. LOCUST
Hauler Address

S.W.H. Registration Number 0066010
I L D O 5 4 1 5 5 0 8 0
S.W.H. Registration Number

Hauler Name

Hauler Address

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE
(Facility Name)
GRIFFITH
City

COLFAX AVE. & C & O R.R.
Address
IN
State
46319
Zip

91808902
Site Number
I N D O 1 6 3 6 0 2 6 5

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.O.T. USE 24,900 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 3000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/1/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 4/1/81

(2) (Authorized Signature)

DATE: 4/1/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 4/1/81

COMMENTS OR SPECIAL INSTRUCTIONS:

TO HQR 4/1/81 T-63 gpm

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION. PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000948

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0375960

MILES LABORATORIES

195 W. BIRCH ST.

(Company Name)

Address

KANKAKEE

IL

60901

City

State

Zip

Authorization Number 997149
11LD048955959
0910550008
Generator Number 14 24

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066010
11LD054155080
S.W.H. Registration Number 25 31

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

(Facility Name)

Address

GRIFFITH

IN

46319

City

State

Zip

91808902
39 Site Number 46
IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.O.T. USE 24,940 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 3000
47 52

1 GALLONS Circle One
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/1/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 04/01/81
34 39

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 4/1/81
60

COMMENTS OR SPECIAL INSTRUCTIONS:

To 110R 4/1/81 T-63 Jmm

IN ILLINOIS: 217/782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000949

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0375961

MILES LABORATORIES

195 W. BIRCH ST.

(Company Name)
KANKAKEE

IL

Address

60901

City

State

Zip

Authorization Number 997149

ILD048955959

0910550008

Generator Number

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 006601

ILD054155080

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

(Facility Name)

Address

91808902

GRIFFITH

IN

46319

City

State

Zip

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.O.T. USE LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/6/81

Jenna Barber (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 4/6/81

(2) (Authorized Signature)

DATE: 4/6/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 4/6/81

COMMENTS OR SPECIAL INSTRUCTIONS:

To 110 & 4/6/81 T-63 J721

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424 8802

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000950

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0375962

MILES LABORATORIES

(Company Name)

KANKAKEE

City

195 W. BIRCH ST.

Address

IL

State

60901

Zip

Authorization Number 997149

ILD048955959

0910550008

Generator Number

KANKAKEE INDUSTRIAL DISPOSAL

Hauler Name

1360 E. LOCUST

Hauler Address

S.W.H. Registration Number 0066012

ILD054155080

S.W.H. Registration Number 32 38

Hauler Name

Hauler Address

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

GRIFFITH

City

COLFAX AVE. & C & O R.R.

Address

IN

State

46319

Zip

91808902

Site Number

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.O.T. USE 41,600 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS Circle One
CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/15/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

(2) (Authorized Signature)

DATE: 4/13/81

DATE: 4/15/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000951

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0375963

MILES LABORATORIES

(Company Name)

KANKAKEE

City

195 W. BIRCH ST.

Address

IL

State

60901

Zip

Authorization Number 997149

ILD048955959

0910550008

Generator Number

KANKAKEE INDUSTRIAL DISPOSAL

Hauler Name

WASTE HAULER(S)

1360 E. LOCUST

Hauler Address

S.W.H. Registration Number 0066012

ILD054155080

S.W.H. Registration Number

AMERICAN CHEMICAL SERVICE

(Facility Name)

GRIFFITH

City

COLFAX AVE. & C & O R.R.

Address

IN

State

46319

Zip

91808902

Site Number

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.O.T. USE 37,230 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 4500

GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/16/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE: 4/15/81

(2)

(Authorized Signature)

DATE: 4/16/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES 4 NO 16/81

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 4/16/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 121K T-163 4/16/81 gjm

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000952

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0375964

Authorization Number 997149
ILD048955959
0910550008
Generator Number 14 24

MILES LABORATORIES

195 W. BIRCH ST.

(Company Name)
KANKAKEE

Address

IL

60901

City

State

Zip

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012
ILD054155080

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

(Facility Name)

Address

91808902
Site Number 39 46

GRIFFITH

IN

46319

City

State

Zip

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE

WEIGHT FOR D.O.T. USE 41,570 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/23/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 4/23/81

(2) (Authorized Signature)

DATE: 4/23/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 4/23/81

COMMENTS OR SPECIAL INSTRUCTIONS:

TO 11072 4/23/81 T-63 973M

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000953

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0375965

SPECIAL WASTE HAULING MANIFEST

MILES LABORATORIES

195 W. BIRCH ST.

(Company Name)

Address

KANKAKEE

IL

60901

City

State

Zip

Authorization Number

997149

ILD048955959

0910550008

Generator Number

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

ILD054155080

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

(Facility Name)

Address

GRIFFITH

IN

46319

City

State

Zip

91808902

Site Number

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

WEIGHT FOR D.O.T. USE 41,580 LBS
TUNS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/29/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 4/29/81

(2) (Authorized Signature)

DATE: 4/29/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 4/29/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 110K 4/29/81 T-63 gm

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000954

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0375966

Authorization Number 997149
ILD048955959
Generator Number 0910550008

MILES LABORATORIES

(Company Name)

195 W. BIRCH ST.

Address

KANKAKEE

City

IL

State

60901

Zip

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

Hauler Name

1360 E. LOCUST

Hauler Address

S.W.H. Registration Number 0066012

ILD054155080

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

COLFAX AVE. & C & O R.R.

Address

GRIFFITH

City

IN

State

46319

Zip

91808902

Site Number 48

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.O.T. USE 41,550 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (circle one)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE 5/5/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) [Signature]
(Authorized Signature)

DATE 5/4/81

(2) [Signature]
(Authorized Signature)

DATE 5/5/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

DATE 5/5/81

COMMENTS OR SPECIAL INSTRUCTIONS:

TO 110R T-63 5/5/81 g7m

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000955

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0375967

MILES LABORATORIES

195 W. BIRCH ST.

(Company Name)
KANKAKEE

Address

IL

60901

City

State

Zip

Authorization Number

997149

ILDO48955959

0910550008

Generator Number

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

ILD054155080

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.P.

(Facility Name)

Address

GRIFFITH

IN

46319

City

State

Zip

91808902

Site Number

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

WEIGHT FOR D.O.T. USE 41.540 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/7/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 5/21/81

(2) (Authorized Signature)

DATE: 5/21/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 5/21/81

COMMENTS OR SPECIAL INSTRUCTIONS: TO 110R T-63 5/7/81 gmm

IN ILLINOIS: 217 / 782-3377

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000956

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0375968

MILES LABORATORIES

195 W. BIRCH ST.

(Company Name)
KANKAKEE

Address,

IL

60901

City

State

Zip

Authorization Number

997149

ILD048955959

0910550008

Generator Number

KANKAKEE INDUSTRIAL DISPOSAL

Hauler Name

1360 E. LOCUST

Hauler Address

S.W.H. Registration Number 0066012

ILD054155080

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

COLFAX AVE. & C & O R.R.

Address

GRIFFITH

IN

46319

City

State

Zip

91808902

Site Number

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE

WEIGHT FOR
D.O.T. USE

37.200

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED:

47 500 52

1 GALLONS (Circle One)
2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE:

5/12/81

(Authorized Signature)

Jennifer Barber

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE:

5/11/81

(2)

(Authorized Signature)

DATE:

5/12/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE:

5/12/81

COMMENTS OR SPECIAL INSTRUCTIONS:

TO 1102 5/12/81 T-63 gm

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000957

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0375969

Authorization Number 997149

ILD048955959

0910550008 G
14 Generator Number 24

MILES LABORATORIES

195 W. BIRCH ST.

(Company Name)

Address

KANKAKEE

IL

60901

City

State

Zip

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012
31

ILD054155080

S.W.H. Registration Number 32 38

Hauler Name

Hauler Address

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

(Facility Name)

Address

91808902
39 Site Number 40

GRIFFITH

IN

46319

City

State

Zip

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE

WEIGHT FOR D.O.T. USE 41,600 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000
47 53

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/19/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 5/18/81
59

(2) (Authorized Signature)

DATE: 5/19/81
60

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 5/19/81
65

COMMENTS OR SPECIAL INSTRUCTIONS: TO #7 SITE T-63 5/19/81 JFM

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000958

COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0375970

Authorization Number 997149
ILD048955959

0910550008 G
Generator Number 24

MILES LABORATORIES

(Company Name)

KANKAKEE

City

195 W. BIRCH ST.

Address

IL

State

60901

Zip

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

Hauler Name

1360 E. LOCUST

Hauler Address

S.W.H. Registration Number 006601

25

31

ILD054155080

S.W.H. Registration Number 32

38

Hauler Name

Hauler Address

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

GRIFFITH

City

COLFAX AVE. & C & O R.R.

Address

IN

State

46319

Zip

91808902

39

Site Number

46

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WEIGHT FOR D.O.T. USE 39,680 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5000

GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5/21/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 05/21/81

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

DATE: 5/21/81

COMMENTS OR SPECIAL INSTRUCTIONS:

TO #7 STILL T-63 5/21/81 gjm

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000959

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0375971

Authorization Number 997149

ILD048955959

0910550008 Generator Number

MILES LABORATORIES

(Company Name)

195 W. BIRCH ST.

Address

KANKAKEE

City

IL

State

60901

Zip

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

Hauler Name

1360 E. LOCUST

Hauler Address

S.W.H. Registration Number 0066013

ILD054155080

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

COLFAX AVE. & C & O R.R.

Address

91808902 Site Number

GRIFFITH

City

IN

State

46319

Zip

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE

WEIGHT FOR D.O.T. USE 41,600 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/1/81

Jenna Barber
(Authorized Signature)

U802

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]

(Authorized Signature)

DATE: 5/29/81

(2) [Signature]

(Authorized Signature)

DATE: 6/1/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

[Signature]

DATE: 6/1/81

COMMENTS OR SPECIAL INSTRUCTIONS:

TO #7 STILL 6/1/81 AT-63 g7m

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

001433

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0375972

MILES LABORATORIES

(Company Name)

KANKAKEE

City

195 W. BIRCH ST.

Address

IL

State

60901

Zip

Authorization Number 997149

ILD048955959

09105500086

Generator Number

KANKAKEE INDUSTRIAL DISPOSAL

Hauler Name

1360 E. LOCUST

Hauler Address

S.W.H. Registration Number 0066013

ILD054155080

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

GRIFFITH

City

COLFAX AVE. & C & O R.R.

Address

IN

State

46319

Zip

91808902

Site Number

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

WEIGHT FOR D.O.T. USE 41,600

LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/11/81

Janora Barber (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 6/11/81

(2) (Authorized Signature)

DATE: 6/11/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 6/11/81

COMMENTS OR SPECIAL INSTRUCTIONS:

TO # 7 STILL 6/11/81 T-63 Jim

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000961

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0375973

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997149

ILD048955959

0910550008

Generator Number

MILES LABORATORIES

(Company Name)

195 W. BIRCH ST.

Address

KANKAKEE

City

IL

State

60901

Zip

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

Hauler Name

1360 E. LOCUST

Hauler Address

S.W.H. Registration Number 0066012

ILD054155080

S.W.H. Registration Number

Hauler Name

Hauler Address

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

COLFAX AVE. & C & O R.R.

Address

GRIFFITH

City

IN

State

46319

Zip

91808902

Site Number

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

WEIGHT FOR
D.O.T. USE 41,000

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/4/81

(Authorized Signature)

Janora Barber

U002

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [Signature]

(Authorized Signature)

DATE: 6/4/81

(2) [Signature]

(Authorized Signature)

DATE: 6/4/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 6/4/81

COMMENTS OR SPECIAL INSTRUCTIONS:

TO #7 STILL T-63 6/4/81 JPM

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424 8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000960

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0375975

MILES LABORATORIES

195 W. BIRCH ST.

Authorization Number 997149
1LD048955959
0910550008
Generator Number

(Company Name)

Address

KANKAKEE

IL

60901

City

State

Zip

KANKAKEE INDUSTRIAL DISPOSAL

WASTE HAULER(S)
1360 E. LOCUST

S.W.H. Registration Number 0066012
1LD054155080

Hauler Name

Hauler Address

Hauler Name

Hauler Address

S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902
Site Number
IND016360265

(Facility Name)

Address

GRIFFITH

IN

46319

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE

WEIGHT FOR D.O.T. USE 36,170 LBS
TONS (circle one)

WEIGHT FOR LEPA USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0.05900

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/17/81

Jenora Barber
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)

DATE: 06/17/81

(2) [Signature]
(Authorized Signature)

DATE: [Signature]

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 6/17/81

COMMENTS OR SPECIAL INSTRUCTIONS:

To #7 still T-63 929M 6/17/81

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000962

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0375976

MILES LABORATORIES

(Company Name)

KANKAKEE

City

195 W. BIRCH ST.

Address

IL

State

60901

Zip

Authorization Number 997149

ILD048955959

0910550008

Generator Number

KANKAKEE INDUSTRIAL DISPOSAL

Hauler Name

1360 E. LOCUST

Hauler Address

S.W.H. Registration Number 0066012

ILD054155080

S.W.H. Registration Number

AMERICAN CHEMICAL SERVICE

(Facility Name)

GRIFFITH

City

COLFAX AVE. & C & O R.R.

Address

IN

State

46319

Zip

91808902

Site Number

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

3. FLAMMABLE

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/22/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Gary Kiel
(Authorized Signature)

DATE: 6/22/81

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

HAZARDOUS WASTE SUBJECT TO FEE YES NO

(Authorized Signature)

DATE: 6/27/81

COMMENTS OR SPECIAL INSTRUCTIONS:

TO #7 STILL 6/22/81 T-63 gpm

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000963

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0375977

MILES LABORATORIES

195 W. BIRCH ST.

(Company Name)

Address

KANKAKEE

IL

60901

City

State

Zip

Authorization Number 997149
ILD048955959
0910550008
Generator Number

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066011

ILD054155080

S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

(Facility Name)

Address

GRIFFITH

IN

46319

City

State

Zip

91808902
Site Number

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE

WEIGHT FOR D.O.T. USE 40,420 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED:

005000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 6/29/81

Genora Barber
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

Richard Miller
(Authorized Signature)

DATE: 6/29/81

(2)

(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 6/29/81

COMMENTS OR SPECIAL INSTRUCTIONS:

TO #7 STILL T-63 6/29/81 gm

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000964

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0375978

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997149

MILES LABORATORIES

195 W. BIRCH ST.

(Company Name)

Address

KANKAKEE

IL

60901

City

State

Zip

ILD048955959

0910550008

Generator Number

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 006601

ILD054155080

S.W.H. Registration Number 32

Hauler Name

Hauler Address

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

(Facility Name)

Address

GRIFFITH

IN

46319

City

State

Zip

91808902

Site Number

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE

WEIGHT FOR D.O.T. USE 39,230 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7/6/81

Jenora Barber
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Richard Miller
(Authorized Signature)

DATE: 07 06 81

(2) _____
(Authorized Signature)

DATE: 1 1 1

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ✓

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Aspen
(Authorized Signature)

DATE: 7 16 81

COMMENTS OR SPECIAL INSTRUCTIONS:

TO #7 STILL T-63 7/2/81 gm

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000965

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0468798

Authorization Number 997149

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008

(Company Name)

Address

Phone Number

14

Generator Number

24

KANKAKEE

IL

60901

ILD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

8159332931

Phone Number

ILD054155080

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32

Phone Number

EPA Number

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

COLFAX AVE

Address

91808902

39

Site Number

40

GRIFFITH

City

IN

State

46319

Zip

2199244370

Phone Number

IND016360265

EPA Number

Alternate (Facility Name)

Address

39

Site Number

40

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE

LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR
D.O.T. USE

24,300

(LBS)

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000

47

1 GALLONS (Circle One)

2 CU. YDS. 1

53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Genoia Barber

(Authorized Signature)

DATE: 7/15/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) John M. Barber

(Authorized Signature)

DATE: 7/15/81

(2)

(Authorized Signature)

DATE: 7/15/81

DISPOSAL STORAGE OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature)

DATE: 7/15/81

COMMENTS OR SPECIAL INSTRUCTIONS

To # 7 STILL 7/15/81 T-63 JIM

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION, PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

000966

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0468799

Authorization Number 997149

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008

(Company Name)

Address

Phone Number

14

Generator Number

24

KANKAKEE

IL

60901

1LD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

8159332931

1LD054155080

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

39

Site Number

46

GRIFFITH

IN

46319

2199244370

IND016360265

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE

LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR D.O.T. USE 37,720 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Jenora Barker
(Authorized Signature)

DATE: 8/3/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) Richard Miller
(Authorized Signature)

DATE: 08/03/81

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

7/3/81
(Authorized Signature)

DATE: 8/3/81

COMMENTS OR SPECIAL INSTRUCTIONS:

TO 110R T-63 8/3/81 gmm

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 476-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

000967

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0468800

Authorization Number 997149

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008

(Company Name)

Address

Phone Number

14

Generator Number

24

KANKAKEE

IL

60901

ILD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

S.W.H. Registration Number 0066012

Hauler Name

Hauler Address

25

31

8159332931

ILD054155080

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32

38

Phone Number

EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

39

Site Number

40

GRIFFITH

IN

46319

2199244370

IND016360265

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

40

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION

HAZARD CLASS

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR D.O.T. USE 37,740 LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 00500.0

GALLONS (Circle One) 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Janora Barber

(Authorized Signature)

DATE: 8/10/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) Don Engel

(Authorized Signature)

DATE: 08/10/81

(2)

(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE: 8/10/81

COMMENTS OR SPECIAL INSTRUCTIONS

TO 27 STILL T-63 8/10/81 jgm

IN ILLINOIS, 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

000968

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0468802

Authorization Number 997149

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901 ILD048955959
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address

S.W.H. Registration Number 0066012

8159332931
Phone Number

1LD054155080
EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R.
(Facility Name) Address

91808902
Site Number

GRIFFITH
City

IN
State

46319
Zip

2199244370
Phone Number

IND016360265
EPA Number

Alternate (Facility Name)

Address

Site Number

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR D.O.T. USE 44,600 LBS.
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000
47 52 1 GALLONS (circle one)
2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Janora Barber U.S.D.
(Authorized Signature)

DATE: 8/25/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) John W. Barber
(Authorized Signature)

DATE: 8/25/81

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature)

DATE: 8/25/81

COMMENTS OR SPECIAL INSTRUCTIONS:

TO #7 STILL T-63 8/25/81 JPM

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

000970

No. 66040 Date 8-27-81

Gross 29,590

Tare 36,450

Net 36,450

GENERAL FOODS CORPORATION
Kankakee, Illinois

From Miles Lab.

Trucker KID inc.

Contents Spent Acetone To Bin

Weigher

0468803

Authorization Number 997149

270 0910550008

Generator Number

1LD048955959

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

8159332931

Phone Number

1LD054155080

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R.

(Facility Name)

Address

91808902

Site Number

GRIFFITH

IN

46319

Zip

2199244370

Phone Number

IND016360265

EPA Number

City

State

Alternate (Facility Name)

Address

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION:

HAZARD CLASS:

UN1090

UN or NA Number

U002

EPA HW Number

WASTE ACETONE

FLAMMABLE LIQUID

WEIGHT FOR
D.O.T. USE

LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

47

005000 GALLONS (Circle One)

2 CU. YDS.

53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Jenora Barber
(Authorized Signature)

DATE: 8/27/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Sporn Kadour
(Authorized Signature)

DATE: 8/27/81

(2)
(Authorized Signature)

DATE: 8/27/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

J. Druehl
(Authorized Signature)

DATE: 8/27/81

COMMENTS OR SPECIAL INSTRUCTIONS:

TO #1 STILL 7-63 8/27/81 JPA

IN ILLINOIS, 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

000969

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0468805

Authorization Number 997149

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008

(Company Name)

Address

Phone Number

14

Generator Number

24

KANKAKEE

IL

60901

ILD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

8159332931

ILD054155080

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

39

Site Number

46

GRIFFITH

IN

46319

2199244370

IND016360265

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION

HAZARD CLASS:

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR D.O.T. USE 11,600 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 005000
1 GALLONS (circle one)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

WE GENERATOR HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 9/1/81

FR 11/11/81
HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED.

(Signature)

(Signature)

DATE: 9/1/81

DATE: 9/1/81

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

DATE: 9/1/81

STILL T-63 9/1/81 gpm

AGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

4 HAULER

PART 5 IEPA

PART 6 - GENERATOR

000971

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0468807

Authorization Number 997149

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008

(Company Name)

Address

Phone Number

14

Generator Number

24

KANKAKEE

IL

60901

ILD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

S.W.H. Registration Number 0066012

Hauler Name

Hauler Address

8159332931

ILD054155080

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number

32

38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

39

Site Number

46

GRIFFITH

IN

46319

2199244370

IND016360265

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE:

LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

UN1090

U002

WASTE ACETONE

FLAMMABLE LIQUID

UN or NA Number

EPA HW Number

WEIGHT FOR
D.O.T. USE

37,810 LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

47 52

1 GALLONS (circle one)
2 CU. YDS. 1

53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

James Barber
(Authorized Signature)

DATE: 9/21/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED

(1) Richard Miller
(Authorized Signature)

DATE: 09/21/81

(2) _____
(Authorized Signature)

DATE: 9/21/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

James Barber
(Authorized Signature)

DATE: 9/21/81

COMMENTS OR SPECIAL INSTRUCTIONS:

To #7 still 9/22/81 T-63 - jam

IN ILLINOIS, 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. #3

SITE COPY - PART 3

000972

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0468808

Authorization Number 997149

MILES LABORATORIES

(Company Name)

195 W. BIRCH ST.

Address

8159378270

Phone Number

0910550008

Generator Number

KANKAKEE

City

IL

State

60901

Zip

ILD048955959

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

8159332931

Phone Number

ILD054155080

EPA Number

S.W.H. Registration Number 32 38

Hauler Name

Hauler Address

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

COLFAX AVE. & C & O R.R.

Address

91808902

Site Number

GRIFFITH

City

IN

State

46319

Zip

2199244370

Phone Number

IND01636026

EPA Number

Alternate (Facility Name)

Address

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR D.O.T. USE 41,380 LBS
TQNS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000
47 52 53

1 GALLONS (circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 9/29/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED.

(1) John M. Griffin

(Authorized Signature)

DATE: 9/29/81

(2)

(Authorized Signature)

DATE: 9/29/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE: 9/29/81

COMMENTS OR SPECIAL INSTRUCTIONS

TO # 7 STILL T-63 9/29/81 jrm.

ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-6802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV #3

SITE COPY - PART 3

000975

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0468809

Authorization Number 997149

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008

(Company Name)
KANKAKEE

IL 60901

Phone Number

Generator Number

ILD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

8159332931

Phone Number

S.W.H. Registration Number

0066812

ILD054155080

EPA Number

Hauler Name

Hauler Address

Phone Number

EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

(Facility Name)

Address

GRIFFITH

IN

46319

2199244370

Phone Number

91808902

39

Site Number

46

IND016360265

EPA Number

Alternate (Facility Name)

Address

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME ACETONE & CONTAMINATES

WASTE PHASE

LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION

HAZARD CLASS.

UN1090

UN or NA Number

U002

EPA HW Number

WASTE ACETONE

FLAMMABLE LIQUID

WEIGHT FOR
D.O.T. USE

41,590 LBS
(circle one)

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED 005000

005000

1 GALLONS (circle one)
CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Genora Barber

(Authorized Signature)

DATE 10/5/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) John M. Barber

(Authorized Signature)

DATE 10/5/81

(2) John M. Barber

(Authorized Signature)

DATE 10/5/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE

YES

NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

John M. Barber

(Authorized Signature)

DATE 10/5/81

COMMENTS OR SPECIAL INSTRUCTIONS

TO #7 STILL 10/5/81 T-63 grm.

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424 8502 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV # 3

SITE COPY - PART 3

000974

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0468810

Authorization Number 997149

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008

(Company Name)

Address

Phone Number

Generator Number

KANKAKEE

IL

60901

1LD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 00660125

8159332931

1LD054155080

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

39

Site Number

40

GRIFFITH

IN

46319

2199244370

IND016360265

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

40

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME ACETONE & CONTAMINATES

WASTE PHASE LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

U002

UN or NA Number

EPA HW Number

WEIGHT FOR D.O.T. USE 44600 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED 005000 1 GALLONS (circle one)

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE 10/12/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) John A. Wright (Authorized Signature)

DATE 10/12/81

(2) (Authorized Signature)

DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE 10/12/81

COMMENTS OR SPECIAL INSTRUCTIONS

TO #7 STILL T-63 10/12/81 gpm

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

000976

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0468811

Authorization Number 997149

MILES LABORATORIES

195 W. BIRCH ST.

815 937 8270

0910550008

(Company Name)

Address

Phone Number

14

Generator Number

24

KANKAKEE

IL

60901

1LD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

8159332931

Phone Number

1LD054155080

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number

Phone Number

EPA Number

AMERICAN CHEMICAL SERVICE

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

39

Site Number

46

GRIFFITH

IN

46319

2199244370

IND016360265

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

UN1090

UN or NA Number

U002

EPA HW Number

WASTE ACETONE

FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 38,590 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

47

52

GALLONS (Circle One)
2 CU YDS. 1

53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Genora Barber
(Authorized Signature)

DATE 10/19/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Richard Miller
(Authorized Signature)

DATE 10/19/81

(2) _____
(Authorized Signature)

DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE 10/19/81

COMMENTS OR SPECIAL INSTRUCTIONS:

TO #7 SITE 10/19/81 T-63 Jm

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV # 3

SITE COPY - PART 3

000973

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0468812

997149

Authorization Number

8

13

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008

(Company Name)

Address

Phone Number

Generator Number

KANKAKEE

IL

60901

1LD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number

0066012

8159332931

1LD054155080

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number

32

38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

(Facility Name)

Address

91808902

GRIFFITH

IN

46319

2199244370

IND016360265

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME

ACETONE & CONTAMINATES

WASTE PHASE

LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR
D.O.T. USE

40,890 LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED:

005000

47

1 GALLONS (Circle One)

2 CU. YDS

53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Genora Barber
(Authorized Signature)

DATE

11/30/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1)

Richard Miller
(Authorized Signature)

DATE

11/30/81

(2)

(Authorized Signature)

DATE

11/30/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE

11/30/81

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8602 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

To # 7 T-63 GRM 11/30/81

000979

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0468813

Authorization Number

997149

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008

(Company Name)

Address

Phone Number

Generator Number

KANKAKEE

IL

60901

ILD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number

0066017

8159332931

ILD054155080

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number

32

38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

39

Site Number

GRIFFITH

IN

46319

2199244370

IND016360265

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME:

ACETONE & CONTAMINATES

WASTE PHASE:

LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS.

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR
D.O.T. USE

39,100

LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED:

005000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE

11/9/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1)

Don Engelmon

(Authorized Signature)

DATE

11/09/81

(2)

(Authorized Signature)

DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES

NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE

11/9/81

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

TO # 7 still T-63 GRM 11/9/81

000978

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0468815

997149

Authorization Number

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008

(Company Name)

Address

Phone Number

14

Generator Number

24

KANKAKEE

IL

60901

ILD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

S.W.H. Registration Number 0066017

Hauler Name

Hauler Address

8159332931

ILD054155080

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number

32

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

39

Site Number

46

GRIFFITH

IN

46319 2199244370

IND016360265

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME

ACETONE & CONTAMINATES

WASTE PHASE

LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR
D.O.T. USE

39,490 LBS

(circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED:

005000

47

1 GALLONS (circle one)

2 CU. YDS.

53

METHOD OF SHIPMENT (Circle One)

(DRUMS
Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.T.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE 11/2/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) Richard Miller

(Authorized Signature)

DATE 11/02/81

(2) _____

(Authorized Signature)

DATE _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FFE YES ☒ NO ☐

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE 11/2/81

COMMENTS OR SPECIAL INSTRUCTIONS

To 110 R T-63 GRM 11/2/81

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8692 or 292 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

000977

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0468817

Authorization Number 997149

MILES LABORATORIES

(Company Name)

KANKAKEE

City

195 W. BIRCH ST.

Address

IL

State

60901

Zip

8159378270

Phone Number

0910550008

Generator Number

ILD048955959

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

Hauler Name

1360 E. LOCUST

Hauler Address

8159332931

Phone Number

S.W.H. Registration Number 0066012

ILD054155080

EPA Number

S.W.H. Registration Number 32

38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

GRIFFITH

City

COLFAX AVE. & C & O R.R.

Address

IN

State

46319

Zip

2199244370

Phone Number

91808902

Site Number

IND016360265

EPA Number

Alternate (Facility Name)

Address

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT-HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR D.O.T. USE 44,400 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

47

52

1 GALLONS (circle one)
53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Genora Barber
(Authorized Signature)

DATE: 12/15/81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED

(1) [Signature]
(Authorized Signature)

DATE: 12/15/81

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[Signature]
(Authorized Signature)

DATE: 12/15/81

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS, 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

TO #7 SH11 T-63 GRM 12/15/81

000980

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0468818

Authorization Number 997149

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008

(Company Name)

Address

Phone Number

Generator Number

KANKAKEE

IL

60901

ILD04895595

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

8159332931

ILD054155080

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number

Phone Number

EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

39

Site Number

46

GRIFFITH

IN

46319

2199244370

IND01636026

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME ACETONE & CONTAMINATES

WASTE PHASE LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION

HAZARD CLASS

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

U002

UN or NA Number

EPA HW Number

WEIGHT FOR D.O.T. USE 4,580 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED 005000 1 GALLONS (circle one) 2 CU. YDS 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Genora Barber

(Authorized Signature)

DATE 1/11/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) [Signature] (Authorized Signature)

DATE 1/11/82

(2) [Signature] (Authorized Signature)

DATE 1/11/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[Signature]

(Authorized Signature)

DATE 1/11/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS 800 / 424-8302 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 110K T-63 6PM 1/11/82

003157

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552225

Authorization Number 997149

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008

(Company Name)

Address

Phone Number

14

Generator Number

24

KANKAKEE

IL

60901

ILD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

25

31

8159332931

Phone Number

ILD054155080

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32

38

Phone Number

EPA Number

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

39

Site Number

46

GRIFFITH

IN

463192199244370

IND01636026

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT-FOR
D.O.T. USE

44.590

LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

47

52

1 GALLONS (Circle One)
2 CU. YDS
53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE 1/15/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED.

(1) [Signature]
(Authorized Signature)

DATE 01/15/82

(2) [Signature]
(Authorized Signature)

DATE 1/15/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE 1/15/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS - 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV # 3

SITE COPY - PART 3

TO #7 Still T-63 6RM 1/15/82

003158

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

05

Authorization Number 997

MILES LABORATORIES

(Company Name)

KANKAKEE

City

195 W. BIRCH ST.

Address

IL

State

60901

Zip

8159378270

Phone Number

0910550008

Generator Number

ILD048955959

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

25

31

8159332931

Phone Number

ILD054155080

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number

32

38

Phone Number

EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

COLFAX AVE. E C & O R.R.

Address

91808902

39

Site Number

GRIFFITH

City

IN

State

463192199244370

Phone Number

IND01636026

EPA Number

Alternate (Facility Name)

Address

39

Site Number

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS.

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR
D.O.T. USE

39.46 LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

47

1 GALLONS (circle one)

2 CU. YDS.

1

53

METHOD OF SHIPMENT (Circle One)

(DRUMS)

Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

James Barber

(Authorized Signature)

DATE: 1/20/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED

(1)

Richard Miller

(Authorized Signature)

DATE: 01/20/82

(2)

(Authorized Signature)

DATE: 1/20/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature)

DATE: 1/20/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV #3

SITE COPY - PART 3

To #7 Still T-63 6/24 1/24/82

003159

COMPLETED BY
GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552227

Authorization Number 997149
8 13

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008
(Company Name) Address Phone Number 14 Generator Number 24
KANKAKEE IL 60901 ILD04895595
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address S.W.H. Registration Number 0066012
25 31

8159332931 ILD054155080
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 91808902
(Facility Name) Address 39 Site Number 46

GRIFFITH IN 46319 2199244370 IND01636026
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR 40150 LBS
D.O.T. USE TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED 005000 0 1 GALLONS (circle one)
47 52 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____) Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 2/1/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) Richard Miller
(Authorized Signature)

DATE 02/01/82
54 59

(2) _____
(Authorized Signature)

DATE _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE 02/01/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424 8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To # 7540 T-63 ERM 2/1/82

003161

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552228

Authorization Number 997149

MILES LABORATORIES

(Company Name)

195 W. BIRCH ST.

Address

8159378270

Phone Number

0910550008

Generator Number

KANKAKEE

IL

60901

City

State

Zip

ILD048955959

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

Hauler Name

Hauler Address

Registration Number 0066012

8159332931

Phone Number

ILD054155080

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

COLFAX AVE. & C & O R.R.

Address

91808902

Site Number

GRIFFITH

City

IN

State

46319

Zip

2199244370

Phone Number

IND01636026

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME

ACETONE & CONTAMINATES

WASTE PHASE

LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR
D.O.T. USE

44/400

LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED:

005000

1 GALLONS (circle one)

2 CU. YDS

53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)

Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 2/8/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED.

(1) (Authorized Signature)

DATE 02/08/82

(2) (Authorized Signature)

DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE 02/08/82

COMMENTS OR SPECIAL INSTRUCTIONS

ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

TRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

SITE COPY - PART 3

TO #75410 T-63 6124 2/8/82

003162

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552229

Authorization Number 997149

MILES LABORATORIES

(Company Name)

KANKAKEE

City

195 W. BIRCH ST.

Address

IL

State

60901

Zip

8159378270

Phone Number

0910550008

Generator Number

ILD04895595

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

8159332931

Phone Number

ILD054155080

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 37 38

Phone Number

EPA Number

AMERICAN CHEMICAL SERVICE

(Facility Name)

GRIFFITH

City

COLFAX AVE. & C & O R.R.

Address

IN

State

46319

Zip

2199244370

Phone Number

91808902

39

Site Number

IND01636026

EPA Number

Alternate (Facility Name)

Address

39

Site Number

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME ACETONE & CONTAMINATES

WASTE PHASE LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION

HAZARD CLASS.

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR D.O.T. USE 38.500 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED 005000 1 GALLONS (circle one) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE 2/15/92

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) (Authorized Signature)

DATE 02/15/92

(2) (Authorized Signature)

DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE 02/15/92

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV #3

SITE COPY - PART 3

To #75 fill T-63 604 2/15/82

003163

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552230

Authorization Number 997149

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008

(Company Name)

Address

Phone Number

14

Generator Number

6

KANKAKEE

IL 60901

IL D 04895595

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066014

8159332931

ILD054155080

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R.

(Facility Name)

Address

91808902

GRIFFITH

IN

46319

2199244370

IND01636026

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

40

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN 1090

U 002

UN or NA Number

EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

005000 0 1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)

Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 3/1/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) Howard Kinnison
(Authorized Signature)

DATE: 03/01/82

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE: 3/1/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV #3

SITE COPY - PART 3

To #7 Still T-63 GRM 3/1/82

003164

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552231

Authorization Number 8 997149 13

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901
City State Zip EPA Number
ILD048955959

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address
S.W.H. Registration Number 0066014
8159332931 ILD054155080
Phone Number EPA Number

Hauler Name Hauler Address
S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 91808902
(Facility Name) Address Site Number
GRIFFITH IN 46319 2199244370 IND01636026
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE PHASE: LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR D.O.T. USE 40,000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED 005000 1 GALLONS (circle one) 1

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

JINDIA BORRINI
(Authorized Signature)

DATE 3/8/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) James B. Reany KID Inc
(Authorized Signature)
(2) (Authorized Signature)

DATE 3/8/82
DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE 3/8/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV # 3

SITE COPY - PART 3

TO 110 K T-63 GRM 3/8/82

003165

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552232

Authorization Number **997149**

MILES LABORATORIES

(Company Name)

195 W. BIRCH ST.

Address

8159378270

Phone Number

0910550008

Generator Number

KANKAKEE

City

IL

State

60901

Zip

ILD04895595

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number **0066012**

8159332931

Phone Number

ILD054155080

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number **32**

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

COLFAX AVE. & C & O R.R.

Address

91808902

Site Number

GRIFFITH

City

IN

State

46319

Zip

2199244370

Phone Number

IND01636026

EPA Number

Alternate (Facility Name)

Address

Site Number

City

State

Zip

Phone Number

EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: **ACETONE & CONTAMINATES**

WASTE PHASE: **LIQUID**

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR
D.O.T. USE

41,200

LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: **005000**

005000

1 GALLONS (Circle One)
2 CU. YDS. **1**

METHOD OF SHIPMENT (Circle One)

(DRUMS

Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

James Barber
(Authorized Signature)

DATE: **3/16/82**

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *[Signature]*
(Authorized Signature)

DATE **03/16/82**

(2) *[Signature]*
(Authorized Signature)

DATE **3/16/82**

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO **X**

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE **3/16/82**

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS, 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 110 ET-63 CRM 3/16/82

003166

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552233

Authorization Number 997149

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901 ILD048955955
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST 0066012
Hauler Name Hauler Address S.W.H. Registration Number
8159332931 ILD054155080
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 91808902
(Facility Name) Address Site Number
GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR D.O.T. USE 41,200 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 005000 2 CU. YDS 1 GALLONS (Circle One) 53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 3/25/82

WASTE HAULER

HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) (Authorized Signature)

DATE 03/25/82

(2) (Authorized Signature)

DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE 2/25/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS, 217 / 782-3637

24 HOUR EMERGENCY AND SPILL-ASSISTANCE NUMBERS

OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV # 3

SITE COPY - PART 3 TO 110KT-63 GRM 3/25/82

003167

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552234

Authorization Number 997149

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901 ILD048955959
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address
8159332931 11D054155080
Phone Number EPA Number

S.W.H. Registration Number 0066014

S.W.H. Registration Number 32 38

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R.
(Facility Name) Address
GRIFFITH IN 46319 2199244370 91808902
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR D.O.T. USE 11,250 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED 005000 1 GALLONS (Circle One)
CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

James Barber
(Authorized Signature)

DATE: 4/8/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) [Signature]
(Authorized Signature)

DATE: 04/08/82

(2) [Signature]
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

[Signature]
(Authorized Signature)

DATE: 4/18/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV #3

SITE COPY - PART 3

To # 75411 T-63 6PM 4.12.82

003169

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552235

Authorization Number 997149

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901 ILD04895595
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST 8159332931 0066012
Hauler Name Hauler Address Phone Number S.W.H. Registration Number
ILD054155080
EPA Number

Hauler Name Hauler Address Phone Number S.W.H. Registration Number EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 91808902
(Facility Name) Address Site Number
GRIFFITH IN 46319 2199244370 IND01636026
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number EPA Number
City State Zip Phone Number

TO BE COMPLETED BY
WASTE GENERATOR WASTE NAME: ACETONE & CONTAMINATES WASTE PHASE: LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION: WASTE ACETONE HAZARD CLASS: FLAMMABLE LIQUID UN1090 U002
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE 39,000 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 005000
47 52 1 GALLONS (circle one) 2 60 YES 1 53

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) DATE: 4/16/82

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) Richard Miller (Authorized Signature) DATE: 04/16/82
(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY: HAZARDOUS WASTE SUBJECT TO FEE YES NO X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE
DATE: 4/16/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426 2671
DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR
REV - #3

SITE COPY - PART 3

To 100RT-63 GRM 4-16-82

003168

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552236

Authorization Number 997149

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008

(Company Name)

Address

Phone Number

14

Generator Number

24

KANKAKEE

IL

60901

ILD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

S.W.H. Registration Number 0066018

Hauler Name

Hauler Address

8159332931

ILD054155080

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

39

Site Number

40

GRIFFITH

IN

46319

2199244370

IND01636026

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

40

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

U002

UN or NA Number

EPA HW Number

WEIGHT FOR D.O.T. USE 40,250 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 GALLONS (circle one) 1 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE 4/26/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) (Authorized Signature)

DATE 04/26/82

(2) (Authorized Signature)

DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE 4/26/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS, 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To #7 Still T-63 6PM 4-26-82

003170

COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552237

Authorization Number 997149

MILES LABORATORIES

195 W. BIRCH ST. 8159378270

0910550008

(Company Name)
KANKAKEE

IL 60901

ILD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

S.W.H. Registration Number 0066012

Hauler Name

Hauler Address

8159332931

ILD054155080

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

39

Site Number

GRIFFITH

IN

46319

2199244370

IND016360265

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS.

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

47

52

1 GALLONS (Circle One)
CU. YDS. 1

53

METHOD OF SHIPMENT (Circle One)

(DRUMS

Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE 5/3/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) (Authorized Signature)

DATE 05/03/82

(2) (Authorized Signature)

DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE 5/3/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS, 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 476-2675

DISTRIBUTION PART 1 GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

REV. # 3

SITE COPY - PART 3

To #7 Still 7-63 GRM \$3.82

003171

STATE OF ILLINOIS

TO BE COMPLETED BY
WASTE GENERATORENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552238

Authorization Number 997149

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008

(Company Name)

Address

Phone Number

Generator Number

KANKAKEE

IL

60901

ILD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

S.W.H. Registration Number 0066012

Hauler Name

Hauler Address

8159332931

ILD054155080

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

39

Site Number

46

GRIFFITH

IN

46319

2199244370

IND01636026

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR 39,160 LBS
D.O.T. USE TONS (circle one)WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS OR GAL.QUANTITY OF WASTE DELIVERED: 005000
GALLONS (Circle One)
1

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 5/25/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED(1) Richard Miller
(Authorized Signature)

DATE: 05/25/82

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE: 5/25/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART 1 GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

REV #3

SITE COPY - PART 3

TO 110KT-63 GRM 5-25-82

003172

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552239

Authorization Number 8 997149 13

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008

(Company Name)
KANKAKEE

IL 60901

Phone Number

Generator Number

ILD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

S.W.H. Registration Number 0066012

Hauler Name

Hauler Address

8159332931

Phone Number

ILD054155080

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

39

Site Number

GRIFFITH

IN

463192199244370

IND01636026

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS.

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR D.O.T. USE 40,080 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000
GALLONS (Circle One)
CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

James Barber
(Authorized Signature)

DATE 6/2/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Richard Miller*
(Authorized Signature)

DATE 06/02/82

(2) _____
(Authorized Signature)

DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature)

DATE 6/2/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

PLV # 3

SITE COPY - PART 3

TO # 7 SHU 7-63 62M 6-2-82

003173

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0552240

Authorization Number 997149
8 13

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008 G
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901 ILD048955959
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST 8159332931 0066012
Hauler Name Hauler Address S.W.H. Registration Number
Phone Number EPA Number
ILD054155080

Hauler Name Hauler Address S.W.H. Registration Number
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 91808902
(Facility Name) Address Site Number
GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR D.O.T. USE 39,920 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000
GALLONS (Circle One)
CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 6/10/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED

(1) Richard Miller
(Authorized Signature)

DATE: 6/10/82

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE: 6/10/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782 3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV # 3

SITE COPY - PART 3

To #7 filed T-63 6/10/82

003174

TO BE COMPLETED BY
WASTE GENERATORSTATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0634186

Authorization Number 997149

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008

(Company Name)
KANKAKEE

Address

IL 60901

Phone Number

14

Generator Number

G

24

ILD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

25

31

8159332931

Phone Number

ILD054155080

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number

32

38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

39

Site Number

46

GRIFFITH

IN

46319

2199244370

IND01636026

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME:

ACETONE & CONTAMINATES

WASTE PHASE:

LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR
D.O.T. USE

39.800 LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED:

005000

47

GALLONS (Circle One)

2 CU. YDS.

1

53

METHOD OF SHIPMENT (Circle One)

(DRUMS
Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE:

6/17/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:(1) Richard Muller
(Authorized Signature)

DATE:

6/17/82

(2) _____
(Authorized Signature)

DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature)

DATE:

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426 2675

DISTRIBUTION PART 1 GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

REV # 4

SITE COPY - PART 3

To #75410 T-63 GPM 6/17/82

003175

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0634187

Authorization Number 997149

MILES LABORATORIES

(Company Name)

195 W. BIRCH ST.

Address

8159378270

Phone Number

0910550008

Generator Number

KANKAKEE

City

IL

State

60901

Zip

11D048955959

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

Hauler Name

1360 E. LOCUST

Hauler Address

S.W.H. Registration Number 0066012

8159332931

Phone Number

11D054155080

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

COLFAX AVE. & C & O R.R.

Address

91808902

Site Number

GRIFFITH

City

IN

State

46319

Zip

2199244370

Phone Number

IND01636026

EPA Number

Alternate (Facility Name)

Address

39

Site Number

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR
D.O.T. USE

40,186

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED:

005000

47

GALLONS (circle One)
2 CU. YDS

52

53

METHOD OF SHIPMENT (Circle One)

(DRUMS

Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

James L. Miller
(Authorized Signature)

DATE: 7/2/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) *Richard Miller*
(Authorized Signature)

DATE: 07/02/82

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

James L. Miller
(Authorized Signature)

DATE: 7-2-82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS 217 / 782 3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

TO HDR T-63 6PM 7.2.82

003116

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0634188

Authorization Number 887149

MILES LABORATORIES

(Company Name)

195 W. BIRCH ST.

Address

8159378270

Phone Number

0910550008

Generator Number

KANKAKEE

City

IL

State

60901

Zip

ILD048955959

EPA Number

WASTE HAULER

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

25

31

8159332931

Phone Number

ILD054155080

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number

32

38

Phone Number

EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

COLFAX AVE. & C. & O. R.R.

Address

91808902

39

Site Number

40

GRIFFITH

City

IN

State

46319

Zip

2199244370

Phone Number

IND01636026

EPA Number

Alternate (Facility Name)

Address

39

Site Number

40

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME ACETONE & CONTAMINATES

WASTE PHASE LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR
D.O.T. USE

40,550 LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED

005000

1 GALLONS (circle one)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS

Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

John M. Hio
(Authorized Signature)

DATE: 8/16/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) *John M. Hio*
(Authorized Signature)

DATE: 08/16/82

(2) *John M. Hio*
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: / /

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

TO HOF T-63 61N 8.16.82

003177

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0634189

Authorization Number 997149

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901 1LD048955959
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address
8159332931 1LD054155080
Phone Number EPA Number

S.W.H. Registration Number 0066012

S.W.H. Registration Number 32 38

Hauler Name Hauler Address
Phone Number EPA Number

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R.
(Facility Name) Address
GRIFFITH IN 46319 2199244370 IND01636026
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS.

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR D.O.T. USE 40.22 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED 005000
GALLONS (circle one)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Genora Barber
(Authorized Signature)

DATE: 8/23/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) James Leary K.d.
(Authorized Signature)

DATE: 8/23/82

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

Amlee
(Authorized Signature)

DATE: 8/23/82

COMMENTS OR SPECIAL INSTRUCTIONS.

IN ILLINOIS 217 / 782 3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART 1 GENERATOR PART 2 IEPA PART 3 SITE PART 4 HAULER PART 5 IEPA PART 6 GENERATOR

REV # 4

SITE COPY - PART 3

To #7 Still T-63 6/24/82 8-23-82

003178

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0634192

Authorization Number 8 13

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008 G

(Company Name)

Address

Phone Number

Generator Number

KANKAKEE

IL

60901

ILD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

S.W.H. Registration Number 0066012

Hauler Name

Hauler Address

8159332931

ILD054155080

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O.R.R.

91808902

(Facility Name)

Address

39

Site Number

GRIFFITH

IN

4631912199244370

IND01636026

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME ACETONE & CONTAMINATES

WASTE PHASE LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION

HAZARD CLASS

UN1090

U002

UN or NA Number

EPA HW Number

WASTE ACETONE

FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 41,700 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

005000 GALLONS (circle one)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 8/30/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED

(1) (Authorized Signature)

(2) (Authorized Signature)

DATE 08 / 30 / 82

DATE

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE 83082

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 476-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV # 4

SITE COPY - PART 3

To #75411 7-63 6/11 8-30-82

003179

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0634193

Authorization Number

927149

MILES LABORATORIES

(Company Name)

195 W. BIRCH ST.

Address

8159378270

Phone Number

0910550008

Generator Number

KANKAKEE

City

IL

State

60901

Zip

ILD048955959

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number

0066012

8159332931

Phone Number

11D054155080

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number

32

38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

COLFAX AVE. & C & O R.R.

Address

91808902

39

Site Number

46

GRIFFITH

City

IN

State

46319

Zip

2199244370

Phone Number

IND01636026

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME:

ACETONE & CONTAMINATES

WASTE PHASE:

LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION:

HAZARD CLASS.

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR
D.O.T. USE

40.20

LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED:

005000

47

52

1 GALLONS (circle one)

2 CU. YDS

53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE

11/15/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED.

(1)

(Authorized Signature)

DATE

11/15/82

(2)

(Authorized Signature)

DATE

11/15/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE

YES

NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE

11/15/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2575

DISTRIBUTION PART 1 GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

REV # 4

SITE COPY - PART 3

TO 110 F T-63 6PM 11-15-82

003180

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0661194

Authorization Number 8 13

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901
City State Zip EPA Number
WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address
S.W.H. Registration Number 0066012
8159332931 11D054155080
Phone Number EPA Number
S.W.H. Registration Number 32 38
EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 91808902
(Facility Name) Address Site Number
GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE PHASE: LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: HAZARD CLASS: UN1090 U002
WASTE ACETONE FLAMMABLE LIQUID UN or NA Number EPA HW Number

WEIGHT FOR LBS WEIGHT FOR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: 005000 1 GALLONS (Circle One)
D.O.T. USE TONS (circle one) CONVERTED TO CU. YDS. OR GAL. 2 CU. YDS. 1
METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

General Baruch
(Authorized Signature)

DATE: 3/3/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) Howard Kinneman
(Authorized Signature)

DATE: 03 03 83

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Bob Mauer
(Authorized Signature)

DATE: 0903183

COMMENTS OR SPECIAL INSTRUCTIONS:

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0661195

Authorization Number 8 13

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008

(Company Name)

Address

Phone Number

14

Generator Number

24

KANKAKEE

IL

60901

1LD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

S.W.H. Registration Number 0066012

Hauler Name

Hauler Address

25

31

8159332931

1LD054155080

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number

32

38

Phone Number

EPA Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

39

Site Number

46

GRIFFITH

IN

46319

2199244370

1LD016360265

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR D.O.T. USE 38,290 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 3/16/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) James Henry Kid Inc

(Authorized Signature)

DATE: 3/16/83

(2)

(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 3/16/83

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To #7 Still T-63 GEM 3-16-83

004264

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0661196

Authorization Number 8 13

MILES LABORATORIES (Company Name) 195 W. BIRCH ST. Address 815 937 8270 Phone Number 0910550008 Generator Number
KANKAKEE City IL State 60901 Zip 110048955959 EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL Hauler Name 1360 E. LOCUST Hauler Address 815 933 2931 Phone Number 110054155080 EPA Number
S.W.H. Registration Number 00660125 31

Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) COLFAX AVE. & C & O R.R. Address 91808902 Site Number
GRIFFITH City IN State 46319 Zip 2199244370 Phone Number IND016360265 EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090 UN or NA Number

U002 EPA HW Number

WEIGHT FOR D.O.T. USE 43,660 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

GALLONS (Circle One) 1 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Genora Barber/lec (Authorized Signature)

DATE: 3/28/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Keith Kaden (K110) (Authorized Signature)

DATE: 3/28/83

(2) Gary Reid (Authorized Signature)

DATE: 3/29/83

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

J. D. Mufel

DATE: 3/29/83

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS, 217 / 782-3637

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To #75 tel 3-29-83 T-63

004265

STATE OF ILLINOIS

COMPLETED BY
GENERATORENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0661197

Authorization Number 9 13

LES LABORATORIES 195 W. BIRCH ST. 815 937 8270 0910550008 G
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901 ILD0048955959
City State Zip EPA Number

WASTE HAULER(S)

EE INDUSTRIAL DISPOSAL 1360 E. LOCUST 30
Hauler Name Hauler Address S.W.H. Registration Number 0066032
31

815 933 2931 110054155080
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

ICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 91808902
(Facility Name) Address Site Number

GRIFFITH IN 46319 2199244370 IND01636026
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number 39 46
City State Zip Phone Number EPA Number

COMPLETED BY
TE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA NumberU002
EPA HW NumberGHT FOR 43,080 LBS
T. USE TONS (circle one)WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.QUANTITY OF WASTE DELIVERED 005000 1 GALLONS (Circle One)
47 52 2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

I HEREBY CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

James Barker
(Authorized Signature)

DATE: 3/30/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:Geaney Kid Inc
(Authorized Signature)DATE: 3/30/83
54 59

(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 3/30/83
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

"24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS"

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

N ILLINOIS: 217 / 782-3637

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. 4/4

SITE COPY - PART 3

To 147K T-63 6PM. 3.30.83

004200

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0661198

TO BE COMPLETED BY
WASTE GENERATOR

Authorization Number 8 13

MILES LABORATORIES

195 W. BIRCH ST.

8159378270

0910550008

(Company Name)

Address

Phone Number

14

Generator Number

24

KANKAKEE

IL

60901

11D048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

S.W.H. Registration Number 0066012

Hauler Name

Hauler Address

25

31

8159332931

11D054155080

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

DESTINATION -- DISPOSAL, STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

39

Site Number

40

GRIFFITH

IN

46319

2199244370

IND016360265

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

40

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR D.O.T. USE 42600 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (circle one)
2 CU YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 4/5/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Gary Kid Inc
(Authorized Signature)

DATE: 4/5/83

(2) _____
(Authorized Signature)

DATE: 1/1/83

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE: 4/5/83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 425-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV # 4

SITE COPY - PART 3

T0147 RT-63 6/11 4.5.83

004267

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0661199

Authorization Number 8 13

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008 G
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901 IL D048955959
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1300 E. LOCUST 8159332931 1LD054155080
Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 25 0066012 31

Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 91808902
(Facility Name) Address Site Number
GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR D.O.T. USE 40.620 TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 1 GALLONS (circle one)
47 52 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Genora Barber / ec
(Authorized Signature)

DATE: 4/7/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Gary Kild Inc.
(Authorized Signature)
(2) _____
(Authorized Signature)

DATE: 4/7/83
DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE: 4/7/83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV # 4

SITE COPY - PART 3

TO 147K T-63 GRM 4-7-83

004268

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE-HAULING MANIFEST

0661201

Authorization Number 9 13

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901 ILDO48955959
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address
S.W.H. Registration Number 0066012

8159332931 ILDO54155080
Phone Number EPA Number

S.W.H. Registration Number 32 38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R. 91808902
(Facility Name) Address Site Number
GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name)

Address

39

Site Number

40

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

UN1090

U002

UN or NA Number

EPA HW Number

WASTE ACETONE

FLAMMABLE LIQUID

WEIGHT FOR D.O.T. USE 42,600 (85) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

GALLONS (circle one) 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

James D. Barber
(Authorized Signature)

DATE: 4/15/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) James Henry Kid Inc.
(Authorized Signature)

DATE: 4/15/83

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 4/15/83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 147KT-63 6PM 4/15/83

004269

TO BE COMPLETED BY
WASTE GENERATORSTATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0661202

Authorization Number 8 13

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901
City State Zip EPA Number
1LD048955959

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address
S.W.H. Registration Number 0066012

8159332931 1LD054155080
Phone Number EPA Number

Hauler Name Hauler Address
S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 91808902
(Facility Name) Address Site Number
GRIFFITH IN 46319 2199244370 1ND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN or NA Number 1090

EPA HW Number 0002

WEIGHT FOR 42,260 LBS
D.O.T. USE TONS (circle one)WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

GALLONS (circle one)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 4/28/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) James Beary Kid Inc
(Authorized Signature)

DATE: 4/28/83

(2)
(Authorized Signature)

DATE: 4/28/83

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature)

DATE: 4/28/83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV. # 4

SITE COPY - PART 3

T01472 T-63 6PM 4-28-83

004270

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0661203

Authorization Number 9 13

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 091-055-0008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901 ILD048955959
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST 8159332931 1LD054155080
Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 0066011 0066012

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 91808902
(Facility Name) Address Site Number
GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name)

Address

Site Number 39 46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR D.O.T. USE 40.150 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 5/6/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) Keith Kadow (Authorized Signature)

DATE: 5/6/83

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature)

DATE: 5/6/83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To #7 Still 5.683

004271

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0661214

Authorization Number 8 13

MILES LABORATORIES

(Company Name)

195 W. BIRCH ST.

Address

8159378270

Phone Number

0910550008

Generator Number

KANKAKEE

City

IL

State

60901

Zip

ILDO48955959

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066013

8159332931

Phone Number

ILDO54155080

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

AMERICAN CHEMICAL SERVICE

(Facility Name)

COLFAX AVE. & C & O R.R.

Address

91808902

Site Number

GRIFFITH

City

IN

State

46319

Zip

2199244370

Phone Number

IND016360265

EPA Number

Alternate (Facility Name)

Address

Site Number

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR D.O.T. USE 41.100 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

GALLONS (circle one) 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 5/12/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Howard Kennerly

(Authorized Signature)

DATE: 05/12/83

(2)

(Authorized Signature)

DATE: 5/12/83

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 5/12/83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV # 4

SITE COPY - PART 3

To #75411 5-12-83 T-63 GRU

004272

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0661215

Authorization Number 8 13

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901 ILD048955959
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address

S.W.H. Registration Number 0066012
25 31

8159332931 ILD054155080
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38

Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 91808902
(Facility Name) Address Site Number
GRIFFITH IN 46319 2199244370 ILD016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number 39 46

City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR D.O.T. USE 39,860 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000
47 52 1 GALLONS (Circle One)
2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 5/20/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) Karl Inc James Heary
(Authorized Signature)

DATE: 5/20/83

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 5/22/83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV #4

SITE COPY - PART 3

To # 75111 5.20.83

004273

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0634195

Authorization Number 9 13

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008 G
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901 ILD048955959
City State Zip EPA Number

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address
8159332931 ILD054155080
Phone Number EPA Number

S.W.H. Registration Number 25 0066012 31
S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 91808902
(Facility Name) Address Site Number
GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR D.O.T. USE 40,200 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL QUANTITY OF WASTE DELIVERED: 005000 2 CU. YDS. 1
GALLONS (Circle One) 52 53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Genora Barber
(Authorized Signature)

DATE: 2/1/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Hewlett Kinner*
(Authorized Signature)

DATE: 02/04/83

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Boys M...
(Authorized Signature)

DATE: 02/07/83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

70147FT-63 62M 2-783

004262

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0791640

Authorization Number 8 _____ 13

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901
City State Zip EPA Number
1LD048955959

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address
8159332931 1LD054155080
Phone Number EPA Number

S.W.H. Registration Number 25 0066012

S.W.H. Registration Number 32 _____ 38

Hauler Name Hauler Address
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O.R.R. 91808902
(Facility Name) Address Site Number
GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN 090

UN or NA Number

U 002

EPA HW Number

WEIGHT FOR LBS
D.O.T. USE TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 1 GALLONS (Circle One)
47 52 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS _____) Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 6/14/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Eric Sanders
(Authorized Signature)

DATE: 06/14/83

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL STORAGE OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 6/14/83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

TO #7 STU T-63 GRM 6/14/83

004274

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0791641

Authorization Number _____

MILES LABORATORIES
(Company Name)
KANKAKEE
City
195 W. BIRCH ST.
Address
IL
State
60901
Zip
815 937 8270
Phone Number
09105 50008
Generator Number
ILD048955959
EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL
Hauler Name
1360 E. LOCUST
Hauler Address

S.W.H. Registration Number _____
0066012
25 31

815 933 2931
Phone Number
ILD054155080
EPA Number

Hauler Name
Hauler Address

S.W.H. Registration Number _____
32 38

Phone Number
EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE
(Facility Name)
COLFAX AVE. & C & O R.R.
Address
91808902
Site Number
GRIFFITH
City
IN
State
46319 2199244370
Zip Phone Number
IND016360265
EPA Number
Alternate (Facility Name)
Address
City
State
Zip
Phone Number
EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR D.O.T. USE 36110 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 6/23/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Keith Kadous (KID)
(Authorized Signature)
(2) _____
(Authorized Signature)

DATE: 6/23/83
34 39

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE, YES _____ NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

7 Dumble
(Authorized Signature)

DATE: 6/23/83
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS, 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To # 75110 T-63-624 6-23-83

004276

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0791642

Authorization Number 8 13

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address
8159332931 1LD054155080
Phone Number EPA Number
S.W.H. Registration Number 25 0066012
31
S.W.H. Registration Number 32 38
EPA Number

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R.
(Facility Name) Address
GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR 3,400 LBS
D.O.T. USE TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000
47 52

GALLONS (circle one)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____) TANK TRUCK
Number

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

James L. Barber
(Authorized Signature)

DATE: 7/20/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) *Tony Spivey*
(Authorized Signature)
(2) _____
(Authorized Signature)

DATE: 7/20/83
54 59

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

J. H. Harker
(Authorized Signature)

DATE: 7/20/83
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0791643

Authorization Number 8 13

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008 G
(Company Name) Address Phone Number 14 Generator Number 24
KANKAKEE IL 60901 ILD048955959
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST S.W.H. Registration Number 0066014
Hauler Name Hauler Address 25
8159332931 ILD054155080
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE.

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 91808902
(Facility Name) Address 39 Site Number 40
GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 40
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR 38780 LBS
D.O.T. USE TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 105000 1 GALLONS (Circle One)
47 52 53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 8/16/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Beany Kid Inc
(Authorized Signature)
(2) _____
(Authorized Signature)

DATE: 8/16/83
54 59

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 8/16/83
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

TO #7 Still 8-16-83 GMM T-63

004278

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0791644

Authorization Number 8 13

MILES LABORATORIES 195 W. BIRCH ST. 815 937 8270 0910550008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901
City State Zip
EPA Number 1100489559

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address
S.W.H. Registration Number 0066012
815 933 2931 ILD054155080
Phone Number EPA Number

Hauler Name Hauler Address
S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R.
(Facility Name) Address
GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE NOS

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR D.O.T. USE 38,640 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000
47 52
1 GALLONS (Circle One)
2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Jenna Barber
(Authorized Signature)

DATE: 8/23/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Kid Inc. Brady*
(Authorized Signature)
(2) _____
(Authorized Signature)

DATE: 8/23/83

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Dunlop
(Authorized Signature)

DATE: 8/23/83

COMMENTS OR SPECIAL INSTRUCTIONS:

To 87 Steel 8-23-83 T-63

004279

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0791645

Authorization Number 8 13

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901 ILD048955959
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address
8159332931 ILD054155080
Phone Number EPA Number

S.W.H. Registration Number 0066012

S.W.H. Registration Number 32 38

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R.
(Facility Name) Address
GRIFFITH IN 46319 2199244370 ILD016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR 40,090 LBS
D.O.T. USE TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 9/6/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Kid Inc Beany
(Authorized Signature)

DATE: 9/6/83
54 59

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 9-6-83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 147KT-63 GRW 9-6-83

004280

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0791646

Authorization Number 8 13

MILES LABORATORIES

(Company Name)

195 W. BIRCH ST.

Address

8159378270

Phone Number

0910550008

Generator Number

6

KANKAKEE

City

IL

State

60901

Zip

1LD048955959

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

Hauler Name

1360 E. LOCUST

Hauler Address

S.W.H. Registration Number 0066016

25

31

8159332931

Phone Number

1LD054155080

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

AMERICAN CHEMICAL SERVICE

(Facility Name)

COLFAX AVE. & C & O R.R.

Address

91808902

39

Site Number

46

GRIFFITH

City

IN

State

46319

Zip

2199244370

Phone Number

IND016360265

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME:

ACETONE & CONTAMINATES

WASTE PHASE:

LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN 1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR D.O.T. USE 38760 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

47

1 GALLONS (Circle One)
CU. YDS. 1

53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 9/8/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Kid Inc. Geary

(Authorized Signature)

DATE: 9/8/83

(2) (Authorized Signature)

DATE: 9/8/83

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 9/8/83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

TO # 75411 T-63 6PM 9-8-83

004281

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0791648

Authorization Number 8 13

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008 G
(Company Name) Address Phone Number Generator Number 24
KANKAKEE IL 60901 ILD048955959
City State Zip EPA Number
WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address
S.W.H. Registration Number 0066 25 31
8159332931 ILD054155080
Phone Number EPA Number
Hauler Name Hauler Address
S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R. 91808902
(Facility Name) Address Site Number 39 46
GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number 39 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE PHASE: LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR LBS WEIGHT FOR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: 005000 1 GALLONS (Circle One)
D.O.T. USE TONS (circle one) CONVERTED TO CU. YDS. OR GAL. 47 52 2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 9/23/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Spencer Kadow
(Authorized Signature)

DATE: 9/23/83 59

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: / / 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

TO 147 K T-63 GCM 9-23-83

004285

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0791649

Authorization Number 8 13

MILES LABORATORIES 195 W. BIRCH ST. 815 9378270 0910550008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901 ILDO48955959
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address
S.W.H. Registration Number 00660011

8159332931 1LD054155080
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38

Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R. 91808902
(Facility Name) Address Site Number

GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number 39 46

City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: HAZARD CLASS:

UN1090 U002
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE 3200 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 005000 1 GALLONS (circle one) 2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 9/20/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 9/20/83

(2) (Authorized Signature)

DATE: 9/20/83

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 9/20/83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

TO 147K T-636PM 9.20.83

004283

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0791650

Authorization Number 8 13

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901 ILD048955959
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST S.W.H. Registration Number 0066011
Hauler Name Hauler Address 25 31
8159332931 ILD054155080
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE CONFAIR AVE. & C & O R.R. 91808902
(Facility Name) Address 39 Site Number 46
GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: ACETONE & CONTAMINATES WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR D.O.T. USE 36,720 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 005000
47 52 1 GALLONS (Circle One) 2 CU. YDS. 33

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Jenna Parker
(Authorized Signature)

DATE: 9/13/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Keith Kadar Waste
(Authorized Signature)
(2) _____
(Authorized Signature)

DATE: 9/13/83
54 59
DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Dunfee
(Authorized Signature)

DATE: 9/13/83
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0824197

TO BE COMPLETED BY
WASTE GENERATOR

SPECIAL WASTE HAULING MANIFEST

Authorization Number 8 13

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008 G
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901 ILD048955959
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address

S.W.H. Registration Number 0066011
25 31

8159332931 ILD054155080
Phone Number EPA Number

Hauler Name Hauler Address Phone Number S.W.H. Registration Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 91808902
(Facility Name) Address Site Number

GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR D.O.T. USE 35.120 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 005000 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 9/30/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Sorman Kadow
(Authorized Signature)

DATE: 9/30/83

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 9/30/83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS, 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 4

SITE COPY-PART 3

T0147R T-636PM 9-30-83

004284

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0824198
1 7

Authorization Number 8 13

MILES LABORATORIES 195 W. BIRCH ST. 8-159378270 0910550008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901 ILD048955959
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address
815-9332931 ILD054155080
Phone Number EPA Number

Hauler Name Hauler Address
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 91808902
(Facility Name) Address Site Number
GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR D.O.T. USE 35000 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000
47 52 1 GALLONS (Circle One)
2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 10/4/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) K. H. H. (K.H.)
(Authorized Signature)

DATE: 10/04/83
54 59

(2)
(Authorized Signature)

DATE: 1/1

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO F

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE

DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER

REV. 8/4

SITE COPY-PART 3

To 27

004286

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0824199
1-----7

Authorization Number 8-----13

<u>MILES LABORATORIES</u> (Company Name)	<u>195 W. BIRCH ST.</u> Address	<u>8 1 5 9 3 7 8 2 7 0</u> Phone Number	<u>0 9 1 0 5 5 0 0 0 8</u> Generator Number
<u>KANKAKEE</u> City	<u>IL</u> State	<u>60901</u> Zip	<u>I L D 0 4 8 9 5 5 9 5 9</u> EPA Number

WASTE HAULER(S)

<u>KANKAKEE INDUSTRIAL DISPOSAL</u> Hauler Name	<u>1360 E. LOCUST</u> Hauler Address	<u>8 1 5 9 3 3 2 9 3 1</u> Phone Number	<u>0 0 6 6 0 1 1</u> S.W.H. Registration Number
			<u>I L D 0 5 4 1 5 5 0 8 0</u> EPA Number

<u></u> Hauler Name	<u></u> Hauler Address	<u></u> Phone Number	<u></u> S.W.H. Registration Number
			<u></u> EPA Number

<u>AMERICAN CHEMICAL SERVICE</u> (Facility Name)	<u>COLFAX AVE. & C & O R.R.</u> Address	<u>9 1 8 0 8 9 0 2</u> Site Number
<u>GRIFFITH</u> City	<u>IN</u> State	<u>46319</u> Zip
<u></u> Alternate (Facility Name)	<u></u> Address	<u></u> Site Number
<u></u> City	<u></u> State	<u></u> Zip
<u></u> Phone Number	<u>2 1 9 9 2 4 4 3 7 0</u> Phone Number	<u>I N D 0 1 6 3 6 0 2 6 5</u> EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: ACETONE & CONTAMINATES WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

<u>WASTE ACETONE</u>	<u>FLAMMABLE LIQUID</u>	<u>U N 1 0 9 0</u> UN or NA Number	<u>U 0 0 2</u> EPA HW Number
WEIGHT FOR D.O.T. USE <u>63560</u> LBS TONS (circle one)	WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.	QUANTITY OF WASTE DELIVERED: <u>005000</u> 47	<u>1</u> GALLONS (Circle One) 2 CU. YDS. <u>1</u> 53

METHOD OF SHIPMENT (Circle One) (DRUMS _____) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 10/17/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature] K-I-D
(Authorized Signature)

(2) _____
(Authorized Signature)

DATE: 10/17/83
54 59

DATE: 10/17/83
60 65

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 4

SITE COPY-PART 3

T0147 ET-63 6PM 10.17.83

004287

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0824200
1 2 3 4 5 6 7

Authorization Number 8 13

MILES LABORATORIES

195 W. BIRCH ST.

8159338270

0910550008

(Company Name)

Address

Phone Number

Generator Number

KANKAKEE

IL

60901

ILD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL

1360 E. LOCUST

S.W.H. Registration Number **0066012**
25 31

Hauler Name

Hauler Address

8159332931

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

39

Site Number

46

GRIFFITH

IN

46319

2199244370

IND016360265

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: **ACETONE & CONTAMINATES**

WASTE PHASE: **LIQUID**

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

11002
EPA HW Number

WEIGHT FOR D.O.T. USE **31,770** LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: **005000**
47 52

1 GALLONS (Circle One)
CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____) Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: **11/8/83**

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) **Keith Kadow**
(Authorized Signature)

DATE: **11/8/83**
54 59

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: **11/8/83**
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 4

SITE COPY-PART 3

TO 1477 T-63 GWA 11-8-83

004288

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0824201
1 7

Authorization Number 8 13

MILES LABORATORIES 195 W. BIRCH ST. 815 937 8270 0910550008
(Company Name) Address Phone Number 14 Generator Number 24
KANKAKEE IL 60901 ILD048955959
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address
815 933 2931
Phone Number EPA Number

S.W.H. Registration Number 0066012
25 31

Hauler Name Hauler Address
Phone Number EPA Number
S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 91808902
(Facility Name) Address 39 Site Number 46

GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

0002
EPA HW Number

WEIGHT FOR 39,600 LBS
D.O.T. USE TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 11/10/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

(2) (Authorized Signature)

DATE: 11/10/83

DATE: 11/10/83

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 11/10/83

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY-PART 3

To #75411 T-63 GRM 11.10.83

004289

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0824202

Authorization Number 8 13

MILES LABORATORIES

195 W. BIRCH ST. 8 1 5 9 3 7 8 2 7 0

0 9 1 0 5 5 0 0 0 8

(Company Name)

Address

Phone Number

14

Generator Number

24

KANKAKEE

IL

60901

ILD048955959

City

State

Zip

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066011

25

31

8159332931

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

AMERICAN CHEMICAL SERVICE

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

COLFAX AVE. & C & O R.R.

91808902

(Facility Name)

Address

39

Site Number

40

GRIFFITH

IN

46319

2199244370

IND016360265

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

40

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

005000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 11/22/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Spam Kadow K.I.D.*
(Authorized Signature)

DATE: 11/22/83

(2) _____
(Authorized Signature)

DATE: 11/22/83

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 11/24/83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV # 4

SITE COPY-PART 3

To #7 Still T-63 GEN 11-22-83

004290

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0824203

Authorization Number 8 13

MILES LABORATORIES 195 W. BIRCH ST. 815 937 8270 0910550008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901
City State Zip EPA Number
1LD048955959

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address
815 933 2931 1LD054155020
Phone Number EPA Number

Hauler Name Hauler Address
Phone Number EPA Number

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R.
(Facility Name) Address
GRIFFITH IN 46319 219 924 4370 1ND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address
City State Zip Phone Number EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: **ACETONE & CONTAMINATES** WASTE PHASE: **LIQUID**
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN 1090
UN or NA Number

U 002
EPA HW Number

WEIGHT FOR D.O.T. USE 38300 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000
47 52 1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Howard Kinneman
(Authorized Signature)

DATE: 12/2/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Howard Kinneman* Howard KINNEMAN
(Authorized Signature)

DATE: 12/02/83

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

W. J. J. J.
(Authorized Signature)

DATE: 12/2/83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY-PART 3

TB # 7 STU T-636RM 12.2.83

004291

STATE OF ILLINOIS

TO BE COMPLETED BY
WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0824204
1 7

Authorization Number 8 13

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008 6
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901 ILD048955959
City State Zip EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST 8159332931 0066012
Hauler Name Hauler Address Phone Number S.W.H. Registration Number
EPA Number

Hauler Name Hauler Address Phone Number S.W.H. Registration Number
EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 91808902
(Facility Name) Address Site Number
GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

BLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR D.O.T. USE 38910 LBS. (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 12/6/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Howard Kinneman Howard Kinneman
(Authorized Signature)

DATE: 12/06/83

(2) (Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 12/6/83

COMMENTS OR SPECIAL INSTRUCTIONS:

BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0824205

Authorization Number 8 13

MILES LABORATORIES

(Company Name)

195 W. BIRCH ST.

Address

8159378270

Phone Number

0910550008

Generator Number

KANKAKEE

City

IL

State

60907

Zip

ILD048955959

EPA Number

WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST

Hauler Name

Hauler Address

S.W.H. Registration Number 0066012

25

31

8159332931

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

COLFAX AVE. & C & O R.R.

Address

91808902

39

Site Number

46

GRIFFITH

City

IN

State

46319

Zip

2199244370

Phone Number

IND016360265

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES

WASTE PHASE:

LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR D.O.T. USE 39,850 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

47

1 GALLONS (circle one)
2 CU. YDS. 1

53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 12/14/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Keith Kadaw (Keith Kadaw)
(Authorized Signature)

DATE: 12/14/83

(2) _____
(Authorized Signature)

DATE: 12/14/83

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 12/14/83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION, PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV. # 4

SITE COPY-PART 3

To #7 still 7-63 GRM 12.14.83 004293

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0852801
1 7

Authorization Number 8 13

MILES LABORATORIES 195 W. BIRCH ST. 8159378270 0910550008
(Company Name) Address Phone Number Generator Number
KANKAKEE IL 60901 ILDO48955959
City State Zip EPA Number
WASTE HAULER(S)

KANKAKEE INDUSTRIAL DISPOSAL 1360 E. LOCUST
Hauler Name Hauler Address
8159332931
Phone Number
S.W.H. Registration Number 0066011
25 31
EPA Number
S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE COLFAX AVE. & C & O R.R. 91808902
(Facility Name) Address Site Number
GRIFFITH IN 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ACETONE & CONTAMINATES WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE ACETONE

FLAMMABLE LIQUID

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR D.O.T. USE 40,280 TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 12/16/83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 12/16/83

(2) (Authorized Signature)

DATE: 12/16/83

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 12/16/83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS, 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY-PART 3

To #7540 T-63 6AM 12-16-83

004261

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0852803
1 7

Authorization Number 8 13

Miles Laboratories	195 W. Birch St.	8 1 5 9 3 7 8 2 7 0	0 9 1 0 5 5 0 0 0 8
(Company Name)	Address	Phone Number	Generator Number
Kankakee	IL 60901		IL D O 4 8 9 5 5 9 5 9
City	State Zip		EPA Number

WASTE HAULER(S)

Kankakee Industrial Disposal	1360 E. Locust	0 0 6 6 0 1 1
Hauler Name	Hauler Address	S.W.H. Registration Number
	8 1 5 9 3 3 2 9 3 1	
	Phone Number	EPA Number
Hauler Name	Hauler Address	S.W.H. Registration Number
	Phone Number	EPA Number

American Chemical Service	Colfax Ave. & C & O R.R.	9 1 8 0 8 9 0 2
(Facility Name)	Address	Site Number
Griffith	IN 46319	2 1 9 9 2 4 4 3 7 0
City	State Zip	Phone Number
Alternate (Facility Name)	Address	Site Number
City	State Zip	Phone Number
		EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: **Acetone & Contaminates** WASTE PHASE: **Liquid**
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

SHIPPING DESCRIPTION:

HAZARD CLASS:

UN 1 0 9 0

U 0 0 2

Waste Acetone

Flammable Liquid

UN or NA Number

EPA HW Number

WEIGHT FOR D.O.T. USE **40680** TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: **005000** 1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Jenora Barber
(Authorized Signature)

DATE: **2/9/84**

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Karl Inc. Cooney*
(Authorized Signature)

(2) _____
(Authorized Signature)

DATE: **2/9/84**

DATE: **1/1/84**

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

M. J. Poyea
(Authorized Signature)

DATE: **2/20/84**

COMMENTS OR SPECIAL INSTRUCTIONS

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0852804
1 7

Authorization Number 8 13

Miles Laboratories 195 W. Birch St. 8159378270 0910550008
(Company Name) Address Phone Number 14 Generator Number 24
Kankakee IL 60901 ILDO48955959
City State Zip EPA Number

WASTE HAULER(S)

Kankakee Industrial Disposal 1360 E. Locust

Hauler Name Hauler Address

8159332931

Phone Number

S.W.H. Registration Number 0066011
25 31

EPA Number

Hauler Name Hauler Address

Phone Number

S.W.H. Registration Number 32 38

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service

Colfax Ave. & C & O R.R.

91808902

(Facility Name)

Address

39 Site Number 40

Griffith

IN

46319

2199244370

INDO1636026

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39 Site Number 40

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Acetone

Flammable Liquid

UN1090

UN or NA Number

U002

EPA HW Number

WEIGHT FOR D.O.T. USE 10,300

BS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

47

GALLONS (Circle One) 2 CU. YDS. 1

53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 2/15/84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Keith Kadow (Keith Kadow)
(Authorized Signature)

DATE: 02/15/84
54 59

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 2/15/84
54 59

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV. # 4

SITE COPY-PART 3

70 #7 Still 7-63 EXAM 2-14-84

006381

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0852805
1 7

Authorization Number 8 13

Miles Laboratories	195 W. Birch St.	8159378270	0910550008
(Company Name)	Address	Phone Number	Generator Number
Kankakee	IL 60901		ILD048955959
City	State	Zip	EPA Number

WASTE HAULER(S)

Kankakee Industrial Disposal	1360 E. Locust	0066012
Hauler Name	Hauler Address	S.W.H. Registration Number
		25 31
		8159332931
		Phone Number
		EPA Number

		0066012
Hauler Name	Hauler Address	S.W.H. Registration Number
		32 38
		EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE			
American Chemical Service	Colfax Ave. & C & O R.R.	91808902	
(Facility Name)	Address	Site Number	
Griffith	IN 46319	2199244370	
City	State	Zip	
		Phone Number	
		EPA Number	
IND01636026			
Alternate (Facility Name)	Address	Site Number	
		39 40	
City	State	Zip	
		Phone Number	
		EPA Number	

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: **Acetone & Contaminates** WASTE PHASE: **Liquid**
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Acetone

Flammable Liquid

UN 1090
UN or NA Number

U 002
EPA HW Number

WEIGHT FOR D.O.T. USE 19,350 LBS	WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.	QUANTITY OF WASTE DELIVERED 002500	1 GALLONS (Circle One)
TONS (circle one)		47 52	2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____) **TANK TRUCK**

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Jenora Barber
(Authorized Signature)

DATE: **2/17/84**

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Keith Kadow (Keith Kadow)*
(Authorized Signature)

DATE: **02/17/84**

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

MA P...
(Authorized Signature)

DATE: **02/17/84**

COMMENTS OR SPECIAL INSTRUCTIONS: _____

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0852806
1 7

Authorization Number 8 13

Miles Laboratories 195 W. Birch St. 8159378270 0910550008
(Company Name) Address Phone Number 14 Generator Number 24
Kankakee IL 60901 ILDO48955959
City State Zip EPA Number

WASTE HAULER(S)

Kankakee Industrial Disposal 1360 E. Locust
Hauler Name Hauler Address S.W.H. Registration Number 0066 011
8159332931
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
American Chemical Service Colfax Ave. & C & O R.R. 91808902
(Facility Name) Address 39 Site Number 46
Griffith IN 46319 2199244370 INDO1636026
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Acetone

Flammable Liquid

UN 1090
UN or NA Number

U 002
EPA HW Number

WEIGHT FOR 27,340 LBS
D.O.T. USE TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 000000 1 GALLONS (Circle One)
47 52 2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 3/13/84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Kid Sue Geary
(Authorized Signature)

DATE: 3/13/84
54 59

(2) _____
(Authorized Signature)

DATE: 1/1/84

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 3/13/84
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0852808

Authorization Number 8 13

Miles Laboratories **195 W. Birch St.** **8159378270** **0910550008**
(Company Name) Address Phone Number Generator Number
Kankakee **IL** **60901** **IL D 048955959**
City State Zip EPA Number

WASTE HAULER(S)

Kankakee Industrial Disposal **1360 E. Locust**
Hauler Name Hauler Address S.W.H. Registration Number
8159332931 **0066014**
Phone Number EPA Number
Hauler Name Hauler Address S.W.H. Registration Number
Phone Number EPA Number

American Chemical Service **Colfax Ave. & C & O R.R.**
(Facility Name) Address S.W.H. Registration Number
Griffith **IN** **46319** **2199244370** **IND 01636026**
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address S.W.H. Registration Number
City State Zip Phone Number EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: **Acetone & Contaminates**

WASTE PHASE: **Liquid**

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

UN1090

U002

Waste Acetone

Flammable Liquid

UN or NA Number

EPA HW Number

WEIGHT FOR D.O.T. USE **33860** **63** TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: **004000** **1** GALLONS (Circle One)
47 52 53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

James Barber
(Authorized Signature)

DATE: **4/6/84**

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Kid*
(Authorized Signature)

DATE: **4/6/84**

(2) _____
(Authorized Signature)

DATE: **4/6/84**

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: **4/6/84**

COMMENTS OR SPECIAL INSTRUCTIONS:

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0852809
1 7

Authorization Number 8 13

Miles Laboratories 195 W. Birch St. 815 937 8270 0910550008
(Company Name) Address Phone Number Generator Number
Kankakee IL 60901 ILD048955959
City State Zip EPA Number

WASTE HAULER(S)

Kankakee Industrial Disposal 1360 E. Locust
Hauler Name Hauler Address
815 933 2931 0066011
Phone Number EPA Number
ILD054155080

Hauler Name Hauler Address
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Service Colfax Ave. & C & O R.R.
(Facility Name) Address
Griffith IN 46319 2199244370 IND01636026
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Acetone & Contaminates

WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Waste Acetone

Flammable Liquid

UN1090
UN or NA Number

U002
EPA HW Number

WEIGHT FOR D.O.T. USE 37,300 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0050.00 47 52

GALLONS (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____) Number

(TANK TRUCK)

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

James A. Gibson
(Authorized Signature)

DATE: 4/17/84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Howard Kinneman* H. KINNEMAN
(Authorized Signature)

DATE: 04/17/84

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

John A. Gibson
(Authorized Signature)

DATE: 04-17-84

COMMENTS OR SPECIAL INSTRUCTIONS:



STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

LS32-0610

LPC 62 8/81

Please print or type.

(Form designed for use on elite (12-pitch) typewriter.)

EPA Form 8700-22 (3-84)

Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ILDO48955959	Manifest Document No. 00001	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but is required by Illinois law.	
3. Generator's Name and Mailing Address Miles Laboratories, Inc. 195 W. Birch St., Kankakee, IL 60901				A. Illinois Manifest Document Number IL 1141263		
4. Generator's Phone (815) 937-8270				B. Illinois Generator's ID 0910550008		
5. Transporter 1 Company Name Kankakee Industrial Disposal				C. Illinois Transporter's ID 0066		
6. US EPA ID Number ILDO54155080				D. (815) 933-2931 Transporter's Phone		
7. Transporter 2 Company Name				E. Illinois Transporter's ID		
8. US EPA ID Number				F. () Transporter's Phone		
9. Designated Facility Name and Site Address American Chemical Service Colfax Ave. & C & O R.R. Griffith, IN 46319				G. Illinois Facility's ID		
10. US EPA ID Number INDO16360265				H. Facility's Phone (219) 924-4370		
GENERATOR	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.
	a. X Acetone & Contaminates Flammable Liquid UN 1090	1	TT	50.00	1	EPA HW Number U002 Authorization Number
	b.					EPA HW Number Authorization Number
	c.					EPA HW Number Authorization Number
	d.					EPA HW Number Authorization Number
J. Additional Descriptions for Materials Listed Above						
K. Handling Codes for Wastes Listed Above						
15. Special Handling Instructions and Additional Information 37,800 lbs						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.						
Printed/Typed Name Jenora Barber		Signature <i>Jenora Barber</i>		Date 09/20/84		
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Signature <i>Howard Kinneman</i>		Date 09/20/84	
	18. Transporter 2 Acknowledgement or Receipt of Materials		Signature		Date	
FACILITY	19. Discrepancy Indication Space					
	20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.		Signature <i>F Dunfee</i>		Date 09/20/84	

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111 1/2, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

75411 T-63

006886



Please print or type

(Form designed for use on elite (12-pitch) typewriter.)

EPA Form 8700-22 (3-84)

Form Approved. OMB No. 2000-0404. Expires 7-31-85

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ILDO48955959	Manifest Document No. 00002	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but is required by Illinois law
3. Generator's Name and Mailing Address Miles Laboratories, Inc. 195 W. Birch St., Kankakee, IL 60901				A. Illinois Manifest Document Number IL 1445627	
4. Generator's Phone (815) 937-8270				B. Illinois Generator's ID Number 0910550008	
5. Transporter 1 Company Name Kankakee Industrial Disposal				C. Illinois Transporter's ID 0066	
6. US EPA ID Number ILDO54155080				D. (815) 933-2931 Transporter's Phone	
7. Transporter 2 Company Name				E. Illinois Transporter's ID	
8. US EPA ID Number				F. Transporter's Phone	
9. Designated Facility Name and Site Address American Chemical Service Colfax Ave. & C & O R.R. Griffith, IN 46319				G. Illinois Facility's ID	
10. US EPA ID Number ILDO16360265				H. Facility's Phone (219) 924-4370	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers	13. Total Quantity
14. Unit				No.	Type
a. HM					
b. X6 Acetone & Contaminates				1	TT
c. Flammable Liquid UN 1090					
d. BY 2600 LBS DRUM					
e. EQ 1150 LBS					
f. 170 LBS					
g. 170 LBS					
h. 170 LBS					
i. 170 LBS					
j. 170 LBS					
k. 170 LBS					
l. 170 LBS					
m. 170 LBS					
n. 170 LBS					
o. 170 LBS					
p. 170 LBS					
q. 170 LBS					
r. 170 LBS					
s. 170 LBS					
t. 170 LBS					
u. 170 LBS					
v. 170 LBS					
w. 170 LBS					
x. 170 LBS					
y. 170 LBS					
z. 170 LBS					
15. Special Handling Instructions and Additional Information				K. Handling Codes for Wastes Listed Above 1 = Gallons 2 = Cubic Yards	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and Illinois regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.					
Printed/Typed Name Jenora Barber				Signature <i>Jenora Barber</i>	
Date 11/07/85				Month Day Year	
17. Transporter 1 Acknowledgement of Receipt of Materials				Date	
Printed/Typed Name Howard Kinneman				Signature <i>Howard Kinneman</i>	
Date 11/07/85				Month Day Year	
18. Transporter 2 Acknowledgement of Receipt of Materials				Date	
Printed/Typed Name				Signature	
Date				Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.					
Printed/Typed Name FDUNFEZ				Signature <i>FDUNFEZ</i>	
Date 11/7/85				Month Day Year	

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV 46

GENERATOR COPY - PART 1. DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.

This Agency is authorized to require, pursuant to Illinois Revised Statutes 1983 Chapter 111 1/2 Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

#7 still 008984



Please print or type

(Form designed for use on elite (12-pitch) typewriter)

EPA Form 8700-22 (3-84)

Form Approved OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but is required by Illinois law	
3. Generator's Name and Mailing Address Miles Laboratories, Inc. 195 W. Birch St., Kankakee, IL 60901		4. Generator's Phone (815) 937-8270	A. Illinois Manifest Document Number 1445628		B. Illinois Generator's ID 0910550008
5. Transporter 1 Company Name Kankakee Industrial Disposal		6. US EPA ID Number IL D O 5 4 1 5 5 0 8 0	C. Illinois Transporter's ID 0 0 6 1 6		D. Transporter's Phone (815) 933-2931
7. Transporter 2 Company Name		8. US EPA ID Number	E. Illinois Transporter's ID		F. Transporter's Phone
9. Designated Facility Name and Site Address American Chemical Service Colfax Ave. & C & O R.R. Griffith, IN 46319		10. US EPA ID Number IN D O 1 6 3 6 0 2 6 5	G. Illinois Facility's ID 219 824 8370		H. Facility's Phone
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. Acetone & Contaminates Flammable Liquid UN 1090		No. 1 Type TT	5.000	1	EPA HW Number Authorization Number
b.					EPA HW Number Authorization Number
c.					EPA HW Number Authorization Number
d.					EPA HW Number Authorization Number
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above 1 = Gallons 2 = Cubic Yards			
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and Illinois regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.					
Printed/Typed Name Jenora Barber		Signature <i>Jenora Barber</i>		Date 11/15/85	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature <i>Howard R. Kinnaman</i>		Date 11/15/85	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Date	
19. Discrepancy Indication Space					
20. Facility Owner or Operator		Signature <i>F. Dunfee</i>		Date 11/15/85	

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBER

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV #6

GENERATOR COPY - PART 1 - DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1980, Chapter 111, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

*75411 T-63

008985



UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law, but is required by Illinois law.	
3. Generator's Name and Mailing Address Miles Laboratories, Inc. 195 W. Birch St., Kankakee, IL 60901		4. Generator's Phone (217) 815-937-8270		5. Transporter 1 Company Name Kankakee Industrial Disposal		6. US EPA ID Number 11 D O 5 8 1 5 5 0 8 0		A. Illinois Manifest Document Number 11445629	
7. Transporter 2 Company Name		8. US EPA ID Number		9. Designated Facility Name and Site Address American Chemical Service Colfax Ave. & C & O R.R. Griffith, IN 46319		10. US EPA ID Number 11 D O 1 6 3 8 0 2 6 5		B. Illinois Generator's ID Number 11445629	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity		14. Unit		Waste No.	
a. Acetone & Contaminates Flammable Liquid UN 1090		No. 1 Type TT		5,000		1		EPA HW Number 11445629	
b.								Authorization Number	
c.								EPA HW Number	
d.								Authorization Number	
e.								EPA HW Number	
f.								Authorization Number	
15. Special Handling Instructions and Additional Information		16. Handling Codes for Wastes Listed Above		17. Gallons		18. Cubic Yards			
19. Discrepancy Indication Space		20. Facility Owner or Operator		21. Facility Name		22. Facility Address		23. Facility Phone	
24. Facility Owner or Operator		25. Facility Name		26. Facility Address		27. Facility Phone		28. Facility ID Number	
29. Facility Owner or Operator		30. Facility Name		31. Facility Address		32. Facility Phone		33. Facility ID Number	
34. Facility Owner or Operator		35. Facility Name		36. Facility Address		37. Facility Phone		38. Facility ID Number	
39. Facility Owner or Operator		40. Facility Name		41. Facility Address		42. Facility Phone		43. Facility ID Number	
44. Facility Owner or Operator		45. Facility Name		46. Facility Address		47. Facility Phone		48. Facility ID Number	
49. Facility Owner or Operator		50. Facility Name		51. Facility Address		52. Facility Phone		53. Facility ID Number	
54. Facility Owner or Operator		55. Facility Name		56. Facility Address		57. Facility Phone		58. Facility ID Number	
59. Facility Owner or Operator		60. Facility Name		61. Facility Address		62. Facility Phone		63. Facility ID Number	
64. Facility Owner or Operator		65. Facility Name		66. Facility Address		67. Facility Phone		68. Facility ID Number	
69. Facility Owner or Operator		70. Facility Name		71. Facility Address		72. Facility Phone		73. Facility ID Number	
74. Facility Owner or Operator		75. Facility Name		76. Facility Address		77. Facility Phone		78. Facility ID Number	
79. Facility Owner or Operator		80. Facility Name		81. Facility Address		82. Facility Phone		83. Facility ID Number	
84. Facility Owner or Operator		85. Facility Name		86. Facility Address		87. Facility Phone		88. Facility ID Number	
89. Facility Owner or Operator		90. Facility Name		91. Facility Address		92. Facility Phone		93. Facility ID Number	
94. Facility Owner or Operator		95. Facility Name		96. Facility Address		97. Facility Phone		98. Facility ID Number	
99. Facility Owner or Operator		100. Facility Name		101. Facility Address		102. Facility Phone		103. Facility ID Number	



MINNESOTA POLLUTION CONTROL AGENCY
DIVISION OF SOLID AND HAZARDOUS WASTE
1935 WEST COUNTY ROAD B-2
ROSEVILLE, MN 55113-2785
ATTN: HWIMS

For MPCA use only

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Instructions on back of form.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in shaded area not required by Federal law. Minnesota rules require Items H. and I.
3. Generator's Name and Mailing Address		MILLER AUTO RECOND. TANKS		A. State Manifest Document Number MN 0042186	
4. Generator's Phone (612) 829-1494		2934 4TH AVE S. MINNEAPOLIS MN 55408		B. State Generator's ID	
5. Transporter 1 Company Name		6. US EPA ID Number		C. State Transporter's ID	
Auto Body Supply Inc		MN 0023023377		D. Transporter's Phone 612-885-416	
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID	
ABC SERVICES		WI 0076159839		F. Transporter's Phone 414-657-6000	
9. Designated Facility Name and Site Address		10. U.S. EPA ID Number		G. State Facility's ID	
AMERICAN CHEMICAL SERVICES		IN 0016360265		H. Facility's Phone 219-924-4510	
420 S. CULFAX GRIFFITH, INDIANA 46319					
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity	14. Unit
HM		No	Type	Quantity	Wt/Vol
a. X WASTE PAINT RELATED MATERIAL		S	DR	2.75	208
b. FLAMMABLE LIQUID NA 1263-F-003					
c.					
d.					
J. Additional Descriptions for Materials Listed Above					
K. Handling Codes for Wastes Listed Above					
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.					
Printed/Typed Name		Signature		Date	
MILLER'S		James A. Miller		06/14/86	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature		Date	
Printed/Typed Name		Signature		Date	
Douglas A. Weimer		Douglas A. Weimer		06/18/86	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Date	
Printed/Typed Name		Signature		Date	
FRANK KLEES		Frank Klees		06/20/86	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name		Signature		Date	
G. MURPHY		G. Murphy		06/21/86	

In case of spill or emergency, immediately call the Minnesota Pollution Control Agency at 612/296-7373; the Minnesota Division of Emergency Services at 612/778-0900; the National Response Center at 800/424-9802. Outside Minnesota, call the National Response Center and appropriate state agency.

SOUTHEASTERN WASTE TREATMENT, INC.

P.O. BOX 1697 • DALTON, GEORGIA 30720 • 404-278-0091

Offices:

441 N. Hamilton St.

Plants:

No. 1 1015 New S. Harris St.

No. 2 1025 New S. Harris St.

HAZARDOUS WASTE MANIFEST
STATE OF GEORGIA

Date issued:

8 / 12 / 82

Manifest
Document No.

G A 0 0 7 2 9

IDENTIFICATION INFORMATION

EPA ID Number	NAME	MAILING ADDRESS	TELEPHONE
Generator WID00808618	Miller Brewing Co.	4000 West State St. Milwaukee, WI 53201	414/931-2188
Transporter # 1 GAD000222083	Southeastern Waste Treatment, Inc.	P. O. Box 1697 Dalton, GA 30720	404/278-0091
Transporter # 2			
TSDF* IND016360265	American Chemical Services	420 South Colfax Griffith, IN 46319	219/924-4370

WASTE INFORMATION

Containers		DOT Shipping Name, Class & I.D. Number	Total Quantity	Weight	EPA Hazardous Waste	
No	Type				Number	Code
50	Drums	Waste, Hexane, Mixture, N.O.S. Waste, Flammable Liquid, NOS UN1993 UN 1208	50 drums	20,000	D001	I

EMERGENCY INFORMATION

NATIONAL RESPONSE CENTER: 1-800-424-8802

GENERATOR: (404) 931-2188

GEORGIA ENVIRONMENTAL PROTECTION DIVISION: (404) 656-4300

DISPOSER: (219) 924-4370

COMMENTS — SPECIAL HANDLING

CERTIFICATIONS

This is to certify that the above-named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, the U.S. Environmental Protection Agency, and the Georgia Department of Natural Resources.

Miles Foster

Authorized Representative of Generator

Signature

8/19/82

Date:

This is to certify acceptance of the hazardous waste shipment described above.

Southeastern Waste Treatment, Inc.

Authorized Representative or Transporter-1

Signature

8-19-82

Date:

Authorized Representative or Transporter-2

Signature

Date:

This is to certify acceptance of the hazardous waste shipment described above for

☐ T ☐ S ☐ D

Walt Wagoner

Authorized Representative of TSDF

Signature

8-19-82

Date:

*Treatment, Storage or Disposal Facility

002395 COPY 1

A 36476

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Miller Brewing Company		2. EPA IDENTIFICATION NO. WID006095251		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 4000 West State Street								
5. CITY, STATE, ZIP CODE Milwaukee, WI 53201		6. TELEPHONE NUMBER (414) 931-2000						
7. NUMBER & TYPE OF CONTAINER 7-55 GALLON DRUM	8. GALLONS 385	9. WASTE NAME Waste Flammable Liquid, N.O.S.		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN 1210 PL 1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE D001	14. SHIPPING WEIGHT (Pounds) 5000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Miles J. Foster</i>		16. NAME (Print) Miles J. Foster		17. DATE SHIPPED M / D / Y 11 / 1 / 82

TRANSPORTER SECTION

18. COMPANY NAME Southeastern Waste Treatment		19. EPA IDENTIFICATION NO. GAD000222083	
20. P.O. BOX OR STREET ADDRESS 1015 New South Harris Street			
21. CITY, STATE, ZIP CODE Dalton, GA 30720		22. TELEPHONE NUMBER (404) 278-0091	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) William J. Williams	26. Date Accepted M / D / Y 11 / 1 / 82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Services, Inc.		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Avenue			
35. CITY, STATE, ZIP CODE Griffith, IN		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) GEORGE MURPHY	40. Date Accepted M / D / Y 11 / 2 / 82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

ONDOCK 9.2.82

GEM

To 204 R T-SOGIM 9.14.82

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144

FORM-4400-66

9-80

A 36477

002465

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Miller Brewing Company		2. EPA IDENTIFICATION NO. WID006095251		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 4000 West State Street							
5. CITY, STATE, ZIP CODE Milwaukee, WI 53201		6. TELEPHONE NUMBER (414)-931-2000					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
5-55-gal drums	275	Waste Ink	Flammable Liquid	UN 1210	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	D001	2000
2 " "	110	Waste Alcohol, N.O.S.	Flammable Liquid	UN 1987	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	D001	100
1- " "	55	Waste Toluene	Flammable Liquid	UN 1294	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	D001	400
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Miles J. Postar</i>		16. NAME (Print) Miles J. Postar	
						17. DATE SHIPPED M / D / Y 11/1/82	

TRANSPORTER SECTION

18. COMPANY NAME Southeastern Waste Treatment		19. EPA IDENTIFICATION NO. GAD000222083	
20. P.O. BOX OR STREET ADDRESS 1015 New South Harris Street			
21. CITY, STATE, ZIP CODE Dalton, GA 30720		22. TELEPHONE NUMBER (404) 278-0091	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Services, Inc.		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Avenue			
35. CITY, STATE, ZIP CODE Griffith, IN		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Gene Murphy</i>	39. NAME (Print) GEO MURPHY	40. Date Accepted M / D / Y 11/2/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

70104 RT-50.6 KM 9.7X.52

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER

A 36478

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Miller Brewing Company		2. EPA IDENTIFICATION NO. WID00030861D		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 4000 West State Street							
5. CITY, STATE, ZIP CODE Milwaukee, WI 53201		6. TELEPHONE NUMBER (414) 931-2000					
7. NUMBER & TYPE OF CONTAINER 50-55 gal drums	8. GALLONS 2750	9. WASTE NAME Waste Hexane Mixture, N.D.S.	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN 1208	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE D001	14. SHIPPING WEIGHT (Pounds) 20,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Miles J. Postar</i>		16. NAME (Print) Miles J. Postar	
						17. DATE SHIPPED M / D / Y 6/19/82	

TRANSPORTER SECTION

18. COMPANY NAME Southeastern Waste Treatment		19. EPA IDENTIFICATION NO. GAD000222083	
20. P.O. BOX OR STREET ADDRESS 1015 New South Harris Street			
21. CITY, STATE, ZIP CODE Dalton, GA 30720		22. TELEPHONE NUMBER (404) 278-0091	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>ILB King</i>	25. NAME (Print) ILB King	26. Date Accepted 8/19/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Services, Inc.		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Avenue			
35. CITY, STATE, ZIP CODE Griffith, IN		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>George Murphy</i>	39. NAME (Print) GEORGE MURPHY	40. Date Accepted 8/19/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

On dock 8-20-82

To 2047 T-506241 8-22-82

002396

A 52305

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME		2. EPA IDENTIFICATION NO.		3. COMMENTS/SPECIAL INSTRUCTIONS				
Miller Brewing Company		WID000808618						
4. P.O. BOX OR STREET ADDRESS								
4000 West State Street								
5. CITY, STATE, ZIP CODE		6. TELEPHONE NUMBER						
Milwaukee, WI 53201		414 931-2000						
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
36-55 gal	2090	Waste Hexane Mixture, N.O.S.		Flammable Liquid	UN 1208	1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>	D001	15,700
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE		16. NAME (Print)		17. DATE SHIPPED M / D / Y
				Miles J. Foster		Miles J. Foster		1/10/82

TRANSPORTER SECTION			
18. COMPANY NAME		19. EPA IDENTIFICATION NO.	
ABC Services Inc.		WID076159839	
20. P.O. BOX OR STREET ADDRESS			
5700 49th Street			
21. CITY, STATE, ZIP CODE		22. TELEPHONE NUMBER	
Kenosha, Wisconsin 53142		414 657-6222	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE		25. NAME (Print)	
[Signature]		Kip Nelson	
26. Date Accepted		27. 2nd. TRANSPORTER COMPANY NAME	
2/26/82			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
28. EPA IDENTIFICATION NO.		29. AUTHORIZED SIGNATURE	
30. NAME (Print)		31. Date Accepted	
		M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME		33. EPA IDENTIFICATION NO.	
American Chemical Services, Inc.		IND016360265	
34. P.O. BOX OR STREET ADDRESS			
420 S. Colfax Avenue			
35. CITY, STATE, ZIP CODE		36. TELEPHONE NUMBER	
Graftith, Indiana		219 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE		39. NAME (Print)	
[Signature]		ALVIN W. HOPKINS	
40. Date Accepted		41. ALTERNATE HAZARDOUS WASTE FACILITY NAME	
2/23/82			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
42. EPA IDENTIFICATION NO.		43. AUTHORIZED SIGNATURE	
44. NAME (Print)		45. Date Accepted	
		M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 RT-50
GPM 6-2-82

002393

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER
A 52306

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION							
1. COMPANY NAME Miller Brewing Company		2. EPA IDENTIFICATION NO. WID006085251		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 4000 West State Street							
5. CITY, STATE, ZIP CODE Milwaukee, WI 53201		6. TELEPHONE NUMBER (414) 931-2000					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
1-35.4	55	WASTE INK	Flammable Liquid	UN1210	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	D001	400
1-55.4	55	WASTE ALCOHOL, N.O.S.	Flammable Liquid	UN1987	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	D001	400
1-35.4	55	WASTE TOLUENE	Flammable Liquid	UN1204	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	D001	400
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Miles J. Foster</i>		16. NAME (Print) Miles J. Foster	
						17. DATE SHIPPED M / D / Y 2/26/82	

TRANSPORTER SECTION			
18. COMPANY NAME ABC Services Inc.		19. EPA IDENTIFICATION NO. WID076159839	
20. P.O. BOX OR STREET ADDRESS 5700 49th Street			
21. CITY, STATE, ZIP CODE Kenosha, Wisconsin 53142		22. TELEPHONE NUMBER (414) 657-6222	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Kip Nelson</i>		25. NAME (Print) Kip Nelson	
		26. Date Accepted M / D / Y 2-26-82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	
		31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical Services, Inc.		33. EPA IDENTIFICATION NO. TND016360265	
34. P.O. BOX OR STREET ADDRESS 420 S. Colfax Avenue			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER 319 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>David Whitaker</i>		39. NAME (Print) DAVID WHITAKER	
		40. Date Accepted M / D / Y 3/3/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number:
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

A 52312

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Miller Brewing Company		2. EPA IDENTIFICATION NO. WID000808618		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 4000 West State Street								
5. CITY, STATE, ZIP CODE Milwaukee, WI 53201		6. TELEPHONE NUMBER (414) 931-2000						
7. NUMBER & TYPE OF CONTAINER 45-55 gal	8. GALLONS 7475	9. WASTE NAME Waste Hexane Mixture, N.O.S.		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1208	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE D001	14. SHIPPING WEIGHT (Pounds) 16,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Miles J. Foster</i>		16. NAME (Print) Miles J. Foster		17. DATE SHIPPED M / D / Y 5/4/82

TRANSPORTER SECTION

18. COMPANY NAME Southeastern Waste Treatment, Inc.		19. EPA IDENTIFICATION NO. GAD000222083	
20. P.O. BOX OR STREET ADDRESS 1015 New South Harris Street			
21. CITY, STATE, ZIP CODE Dalton, Georgia 30720		22. TELEPHONE NUMBER (404) 278-0091	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Steve Owensby</i>	25. NAME (Print) Steve Owensby	26. Date Accepted 5/14/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME Southeastern waste		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Services, Inc.		33. EPA IDENTIFICATION NO. IND01150265	
34. P.O. BOX OR STREET ADDRESS 420 S. Colfax Ave.			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Alvin W. Lisker</i>	39. NAME (Print) Alvin W. Lisker	40. Date Accepted 5/15/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

On dock 5:52 PM

TO 210 RT 50 GRM 6:30 PM

002394

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

9-80

MANIFEST NUMBER

A 52313

002466

GENERATOR (SHIPPER) SECTION													
1. COMPANY NAME		2. EPA IDENTIFICATION NO.		3. COMMENTS/SPECIAL INSTRUCTIONS									
Miller Brewing Company		WID006095251											
4. P.O. BOX OR STREET ADDRESS													
4000 West State Street													
5. CITY, STATE, ZIP CODE		6. TELEPHONE NUMBER											
Milwaukee, WI 53201		(414) 931-2000											
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)					
15-55 gal	425	Waste Ink		Flammable Liquid	UN1210	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	D001	1000					
2-55 gal	110	Waste Alcohol, N.O.S.		Flammable Liquid	UN1987	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	D001	600					
2-55 gal	110	Waste Toluene		Flammable Liquid	UN1294	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	D001	600					
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE		16. NAME (Print)		17. DATE SHIPPED M / D / Y					
				<i>Miles J. Foster</i>		Miles J. Foster		1 / 1					

TRANSPORTER SECTION			
18. COMPANY NAME		19. EPA IDENTIFICATION NO.	
Southeastern Waste Treatment, Inc.		GAD000222083	
20. P.O. BOX OR STREET ADDRESS			
1015 New South Harris Street			
21. CITY, STATE, ZIP CODE		22. TELEPHONE NUMBER	
Dalton, Georgia 30720		(404) 278-0091	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted	
<i>Steve Owen</i>	Steve Owen	5/9/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
Southeastern Waste			
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME		33. EPA IDENTIFICATION NO.	
American Chemical Services, Inc.		IND016360265	
34. P.O. BOX OR STREET ADDRESS			
420 S. Colfax Avenue			
35. CITY, STATE, ZIP CODE		36. TELEPHONE NUMBER	
Griffith, Indiana		(219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted	
<i>Alvin Whitaker</i>	Alvin Whitaker	5/5/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

On dock
5-5-82 6PM

TO 210 RT 50
GRN 6-30-82

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

REV. 6-81

MANIFEST NUMBER

A 102876

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Miller Brewing Company		2. EPA IDENTIFICATION NO. WID000808618		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 4000 West State Street							
5. CITY, STATE, ZIP CODE Milwaukee, WI 53201		6. TELEPHONE NUMBER (414) 931-2000					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
		Waste Hexane Mixture, N.O.S.	Flammable Liquid	UN1208	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	D001	
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE		16. NAME (Print)	
						17. DATE SHIPPED M / D / Y / /	

TRANSPORTER SECTION

18. COMPANY NAME Southeastern Waste Treatment		19. EPA IDENTIFICATION NO. GA0000222083	
20. P.O. BOX OR STREET ADDRESS 1015 New South Harris Street			
21. CITY, STATE, ZIP CODE Dalton, GA 30720		22. TELEPHONE NUMBER (404) 278-0091	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Services, Inc.		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Calfax Avenue			
35. CITY, STATE, ZIP CODE Griffith, IN		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>GEO MURPHY</i>	39. NAME (Print) GEO MURPHY	40. Date Accepted 9/12/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To Sol. Mix T-50
GRW 10-1-82

002398

A 52353

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Miller Brewing Company		2. EPA IDENTIFICATION NO. WID000808618		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 4000 West State Street		5. CITY, STATE, ZIP CODE Milwaukee, Wisconsin 53201		6. TELEPHONE NUMBER (Mr. Miles Foster) 414 531-2188			
7. NUMBER & TYPE OF CONTAINER 1 tank truck	8. GALLONS 4600	9. WASTE NAME Waste Hexane	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1208	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE D001	14. SHIPPING WEIGHT (Pounds) 34000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Miles Foster</i>		16. NAME (Print) Miles J. Foster	
						17. DATE SHIPPED M / D / Y 5/14/83	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155 Street		21. CITY, STATE, ZIP CODE South Holland, Illinois 60473	
		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Miguel Garcia</i>	25. NAME (Print) Miguel Garcia	26. Date Accepted M / D / Y 5/11/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Services		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Avenue		35. CITY, STATE, ZIP CODE Griffith, Indiana 46319	
		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Alvin Whitaker</i>	39. NAME (Print) Alvin Whitaker	40. Date Accepted M / D / Y 5/17/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211KT-50 GRM
3.483



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

IG 0 00 0 17 4 3 8

Manifest Document No.

17 1 87

2. Page 1

1 of 1

Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address

Miller Davis
1029 Portage Road, Kalamazoo, MI 49001

4. Generator's Phone ()

516 345-3561

5. Transporter 1 Company Name

A&B Industrial Services

6. Use EPA ID Number

MI ID 0 17 16 7 22 2

7. Transporter 2 Company Name

8. Use EPA ID Number

9. Designated Facility Name and Site Address

American Chemical Service
420 S. Colfax

10. Use EPA ID Number

MI ID 01 63 6 0 26 5
219-924-4370

A. State Manifest Document Number

INA 0117187

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone

616-375-9595

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

NO Waste Flammable Liquid N.O.S.
Flammable UN1993

12. Containers

No. Type

1 0

13. Total Quantity

90550

14. Unit Wt./Vol.

6

1. Waste No.

0001

J. Additional Descriptions for Materials Listed Above

WASTE IS REQUIRED BY INDIANA STATE LAW TO BE TREATED BY AN APPROVED TREATMENT, STORAGE, AND DISPOSAL FACILITY (TSDF) WITHIN THE STATE OF INDIANA.

K. Handling Codes for Wastes Listed Above

FOR INFORMATION OF THE TSD FACILITY, THE GENERATOR CERTIFIES THAT THE WASTE IS NOT A MIXTURE OF A HAZARDOUS WASTE AND A NONHAZARDOUS WASTE, AND THAT THE WASTE IS NOT A MIXTURE OF TWO OR MORE HAZARDOUS WASTES.

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

DAVID RUCKHOFF

Signature

12/1/87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

DAVID RUCKHOFF

Signature

12/1/87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

DAVID RUCKHOFF

Signature

12/1/87

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name

DAVID RUCKHOFF

Signature

12/1/87

EPA Form 8700-22 (Rev. 9-86)

Previous editions are obsolete.

State Form 11865 10-204R T-50 12/17/81

DISTRIBUTION:

PAGE 1 (white) TSD MAIL TO GENERATOR

PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE

PAGE 3 (light green) TSD MAIL TO TSD STATE

PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM

PAGE 5 (light blue) TSD COPY

PAGE 6 (canary) GENERATOR COPY

PAGE 7 (white) TRANSPORTER 1 COPY

PAGE 8 (white) TRANSPORTER 2 COPY

012852

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0117187



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2050-0039 Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

I.L.D.O. 05178975

Manifest Document No.

2. Page 1 of

Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address

MILLER PAINT EQUIPMENT, LTD.
345 S. STEWART AVE.
ADDISON, IL 60101

4. Generator's Phone (312) 543-8530

A. State Manifest Document Number

INA 0162859

B. State Generator's ID Number 0400055015

5. Transporter 1 Company Name

MR. FRANK, INC.

6. Use EPA ID Number

I.L.D.O. 69506160

C. State Transporter's ID Number 0079

D. Transporter's Phone (312) 596-8377

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID Number

F. Transporter's Phone

9. Designated Facility Name and Site Address

AMERICAN CHEMICAL SERVICES
COLFAX AVE. C C & D RR
GRIFFITH, IN 46319

10. Use EPA ID Number

I.N.D.O. 16360265

G. State Facility's ID Number

01508982

H. Facility's Phone (312) 768-3408

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)

WASTE FLAMMABLE LIQUID, N.O.S.
FLAMMABLE LIQUID
UN 1993

12. Containers

No. Type

089 0M

13. Total Quantity

Unit

0.000000

14. Unit

Wt/Vol

0.000000

15. Waste No.

000000

J. Additional Descriptions for Materials Listed Above

WASTE PAINT & SOLVENTS

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

James Szyazka

Signature

James Szyazka

Month Day Year 1 1 8

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Joe Kooniga

Signature

Joe Kooniga

Month Day Year 1 2 3 1 8 7

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name

Harold F. Schmidt

Signature

Harold F. Schmidt

Month Day Year 1 1 8 7

EPA Form 8700-22 (Rev. 9-86)

Previous editions are obsolete.

State Form 11865

DISTRIBUTION:

PAGE 1 (white) TSD MAIL TO GENERATOR

PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE

PAGE 3 (light green) TSD MAIL TO TSD STATE

PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM

PAGE 5 (light blue) TSD COPY

PAGE 6 (canary) GENERATOR COPY

PAGE 7 (white) TRANSPORTER 1 COPY

PAGE 8 (white) TRANSPORTER 2 COPY

46-2042 T-50 1/13/88

17-2042 T-50 1/19/88

6-2042 T-50 2/1/88

9-2042 T-50 2/2/88

5-2042 T-50 2/3/88

1-MARINE STATE-12/13/86

78526

000000

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424 8802 or 202/426-2675.

INA 0162859



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2050-0039. Expires 9-30-91

**UNIFORM HAZARDOUS
WASTE MANIFEST**

1. Generator's US EPA ID No.

IL D005178975

Manifest
Document No.

00001

2. Page 1

of 1

Information in the shaded areas is
not required by Federal law, but
items D, F, H and I are required by
State law.

3. Generator's Name and Mailing Address

HILLER PAINT EQUIPMENT, LTD.
345 S. STEWART AVE.
ADDISON, IL 60101

4. Generator's Phone (312) 543-8530

5. Transporter 1 Company Name

MR. FRANK, INC.

6. Use EPA ID Number

IL D0069506160

7. Transporter 2 Company Name

8. Use EPA ID Number

9. Designated Facility Name and Site Address

AMERICAN CHEMICAL SERVICES
COLFAX AVE. @ C & O RR
GRIFFITH, IN 46319

10. Use EPA ID Number

IND016360265

A. State Manifest Document Number

INA 0315911

B. State Generator's ID

0430055015

C. State Transporter's ID

0079

D. Transporter's Phone (312) 596-3377

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

91808902

H. Facility's Phone

(312) 768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers

No. Type

13. Total
Quantity

14. Unit
Wt./Vol.

I. Waste No.

a. **WASTE FLAMMABLE LIQUID, N.O.S.**

FLAMMABLE LIQUID

UN 1993

44 DM

24.20 G

F003

F005

J. Additional Descriptions for Materials Listed Above

WASTE PAINT & SOLVENTS

K. Handling Codes for Wastes Listed Above

G=CALLONS

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

James Szyzka

Signature

James Szyzka

Date
Month Day Year
8/15/89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

RICK WITE

Signature

Rick Wite

Date
Month Day Year
8/15/89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date
Month Day Year

19. Discrepancy Indication Space

35 PAIS (210 GAL) ASHCROWE 8/15/89 90103

2042 - 2145 g
PAIS - 48
PAIS - 210
2042 - 17
3426

2-2042CTSO X1

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name

Whitaker A

Signature

Whitaker A

Date
Month Day Year
01/28/89

22-2042CTSO X2
15-2042CTSO X2

8 PAIS (210 GAL) ASHCROWE 8/15/89 90102
17 GAL 2042 TSO 8/15/89

0017056

INA0315911

In case of a spill call the Indiana Office of Environmental Response at 317/241-4330 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

**UNIFORM HAZARDOUS
WASTE MANIFEST**

1. Generator's US EPA ID No.

Manifest
Document No.

2. Page 1
of 6

Information in the shaded areas is
not required by Federal law, but
items D, F, H and I are required by
State law.

3. Generator's Name and Mailing Address

MILLS ELECTRIC CO
4315 CHURCH AVE
HAMMOND, IN 46327

A. State Manifest Document Number

INA 0335039

4. Generator's Phone

219-751-3114

B. State Generator's ID

5. Transporter 1 Company Name

STRAND TRUCKING CO.

6. Use EPA ID Number

TLDOO06.46810

C. State Transporter's ID

331-8440

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

0024031

F. Transporter's Phone

9. Designated Facility Name and Site Address

AMERICAN CHEMICAL SERVICE
400 S. COLFAX AVE
GRIFFITH, IN 46319-0190

10. Use EPA ID Number

IND016360265

G. State Facility's ID

H. Facility's Phone
219-424-4370

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)

a. PERCHLORETHYLENE
CHLORINATED SOLVENT EXHAUST
UN 1897

12. Containers

No. Type

002 DM 00-1-10

13. Total
Quantity

1

14. Unit
Wt/Vol.

1

15. Waste No.

FC01

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

1 = GALLONS

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

RICH MILLS

Signature

[Signature]

Month Day Year
07 25 89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

THOMAS STRAND

Signature

[Signature]

Month Day Year
07 25 89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19

Printed/Typed Name

WHITAKER A

Signature

[Signature]

Month Day Year

07 25 89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0335039



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CEG	N Doc
3. Generator's Name and Mailing Address MILLS ELECTRIC CO 4318 CALUMET AVE HAMMOND, IN 46327			
4. Generator's Phone 219-751-3114		6. Use EPA ID Number ILD000646	
5. Transporter 1 Company Name STRAND TRUCKING CO.		7. Use EPA ID Number	
7. Transporter 2 Company Name		8. Use EPA ID Number	
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE 410 S. COLFAX AVE GRIFFITH, IN 46319-0190		10. Use EPA ID Number IND016360	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			
a. PERCHLOROETHYLENE, CHLORINATED SOLVENT, GRM A UN-1897			
b.			
c.			
d.			
J. Additional Descriptions for Materials Listed Above			
15. Special Handling Instructions and Additional Information			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully proper shipping name and are classified, packed, marked, and labeled, and are in all respects in accordance with applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume of waste generated, that I have selected the practicable method of waste management which minimizes the present and future threat to human health and the environment; OR, if I am not a large quantity generator, I certify that I have selected the best waste management method that is economically practicable.			
Printed/Typed Name RICH MILLS		Signature [Signature]	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name THOMAS STRAND		Signature [Signature]	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature	
19. Discrepancy Indication Space			
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except for the materials listed in the discrepancy space. Printed/Typed Name WHITAKER		Signature [Signature]	

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

0017058

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

A 06953

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milprint Inc.		2. EPA IDENTIFICATION NO. WI0-000068155		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS P.O. Box 434							
5. CITY, STATE, ZIP CODE Milwaukee, WI 53201		6. TELEPHONE NUMBER (414) 332-5800					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
80-55 Gallon Drum	4400	Waste Flammable Liquid	Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	D001	36,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Floyd Lynels</i>		16. NAME (Print) Floyd Lynels	
						17. DATE SHIPPED M / D / Y 9/15/82	

TRANSPORTER SECTION

18. COMPANY NAME Southeastern Waste Treatment, Inc.		19. EPA IDENTIFICATION NO. GA000222083	
20. P.O. BOX OR STREET ADDRESS 1015 New South Harris Street			
21. CITY, STATE, ZIP CODE Dalton, Georgia 30720		22. TELEPHONE NUMBER (404) 278-0091	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) Orville G. [Name]	26. Date Accepted M / D / Y 9/15/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Services, Inc.		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 421 South Colfax Avenue			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) EDUNEE	40. Date Accepted M / D / Y 9/15/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

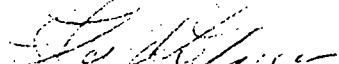
On dock
9.15.82 To 204E
T-50 GRM 9.15.82


002402

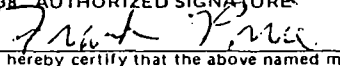
A 06954

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME Milprint, Inc.		2. EPA IDENTIFICATION NO. WID-000068155		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O. Box 454								
5. CITY, STATE, ZIP CODE Milwaukee, WI 53201		6. TELEPHONE NUMBER (414) 332-5800						
7. NUMBER & TYPE OF CONTAINER 77 55 Gallon Drum	8. GALLONS 4785	9. WASTE NAME Waste Flammable Liquid		10. US DOT HAZARD CLASS Flammable liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE D001	14. SHIPPING WEIGHT (Pounds) 39,150
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE 		16. NAME (Print) Floyd Lyness		17. DATE SHIPPED M / D / Y 9 / 1 / 82

TRANSPORTER SECTION			
18. COMPANY NAME Southeastern Waste Treatment, Inc.		19. EPA IDENTIFICATION NO. GA000222083	
20. P.O. BOX OR STREET ADDRESS 1015 New South Harris Street			
21. CITY, STATE, ZIP CODE Dalton, GA 30720		22. TELEPHONE NUMBER (404) 278-0091	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE 	25. NAME (Print) Robert Reynolds	26. Date Accepted M / D / Y 9 / 1 / 82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical Services, Inc.		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 421 South Colfax Avenue			
35. CITY, STATE, ZIP CODE Griffith, IN		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE 	39. NAME (Print) FRANK PRICE	40. Date Accepted M / D / Y 9 / 1 / 82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

On dock 9.24.82
30 to 204 T-50
50 to Sol. Mix T-50 10.1.82

002403

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER

A06961

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION							
1. COMPANY NAME Milprint Inc.		2. EPA IDENTIFICATION NO. WID-000068155		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS P.O. Box 454							
5. CITY, STATE, ZIP CODE Milwaukee, WI 53201		6. TELEPHONE NUMBER (414) 332-5800					
7. NUMBER & TYPE OF CONTAINER 87-55 Gallon Drums	8. GALLONS 4785	9. WASTE NAME Waste Flammable Liquid	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UB1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE D001	14. SHIPPING WEIGHT (Pounds) 39,150
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>[Signature]</i>		16. NAME (Print) Floyd Lyness	
						17. DATE SHIPPED M / D / Y 12 / 17 / 82	

TRANSPORTER SECTION			
18. COMPANY NAME Southeastern Waste Treatment, Inc.		19. EPA IDENTIFICATION NO. GA-000222083	
20. P.O. BOX OR STREET ADDRESS 1015 New South Harris Street			
21. CITY, STATE, ZIP CODE Dalton, GA 30720		22. TELEPHONE NUMBER (400) 278-0091	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) Charles L. Clifton	26. Date Accepted M / D / Y 12 / 17 / 82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y 12 / 17 / 82	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical Services, Inc.		33. EPA IDENTIFICATION NO. IND-16360265	
34. P.O. BOX OR STREET ADDRESS 421 South Colfax Avenue			
35. CITY, STATE, ZIP CODE Griffth, IN		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) GR MORRIS	40. Date Accepted M / D / Y 12 / 17 / 82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

On dock 12-17-82

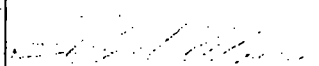
T. 204KT-506PM 12-30-82

A06962

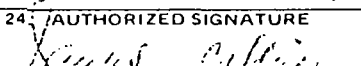
See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

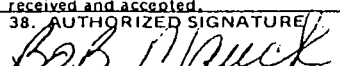
GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milprint Inc.		2. EPA IDENTIFICATION NO. WID-000068155		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O. Box 454								
5. CITY, STATE, ZIP CODE Milwaukee, WI 53201		6. TELEPHONE NUMBER (414) 332-5800						
7. NUMBER & TYPE OF CONTAINER 54 87-55 Gallon Drums	8. GALLONS 4785	9. WASTE NAME Waste Flammable Liquid		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE D001	14. SHIPPING WEIGHT (Pounds) 39,150
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE 		16. NAME (Print) Floyd Lyneis		17. DATE SHIPPED M / D / Y 1 / 1

TRANSPORTER SECTION

18. COMPANY NAME Southeastern Waste Treatment, Inc.		19. EPA IDENTIFICATION NO. GA-000272083	
20. P.O. BOX OR STREET ADDRESS 1015 New South Harris Street			
21. CITY, STATE, ZIP CODE Dalton, GA 30720		22. TELEPHONE NUMBER (400) 278-0091	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE 	25. NAME (Print) JAMES COLLINS	26. Date Accepted M / D / Y 11 / 18 / 82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Services, Inc.		33. EPA IDENTIFICATION NO. IND-16360265	
34. P.O. BOX OR STREET ADDRESS 421 South Colfax Avenue			
35. CITY, STATE, ZIP CODE Griffith, IN		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS We accept 54 Refuse 33			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE 	39. NAME (Print) BOB MAUCK	40. Date Accepted M / D / Y 11 / 18 / 82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

On dock To 201 S. COL W
T. 50 11-29-82

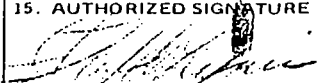
002392

A06963


See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

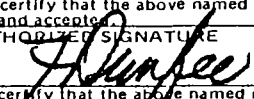
GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milprint Inc.		2. EPA IDENTIFICATION NO. WID-000068155		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS P.O. Box 454							
5. CITY, STATE, ZIP CODE Milwaukee, WI 53201		6. TELEPHONE NUMBER (414) 332-5800					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
40-55 Gallon Drum	2200	Waste Flammable Liquid	Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	D001	18,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE 		16. NAME (Print) Floyd E. Lynne	
						17. DATE SHIPPED M / D / Y 7/11/82	

TRANSPORTER SECTION

18. COMPANY NAME Southeastern Waste Treatment, Inc.		19. EPA IDENTIFICATION NO. GA000222083	
20. P.O. BOX OR STREET ADDRESS 1015 New South Harris Street			
21. CITY, STATE, ZIP CODE Dalton, Georgia 30720		22. TELEPHONE NUMBER (404) 278-0091	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE 		25. NAME (Print) Southwestern Waste Treatment	
		26. Date Accepted M / D / Y	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	
		31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Services, Inc.		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 421 South Colfax Avenue			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE 		39. NAME (Print) F.D. VANFLEET	
		40. Date Accepted M / D / Y 7/11/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0204KT-50
6PM 9.1.82

002401

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER

A 06971

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME Milprint, Inc.		2. EPA IDENTIFICATION NO. WID-000068155		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O. Box 454								
5. CITY, STATE, ZIP CODE Milwaukee, WI 53201		6. TELEPHONE NUMBER (414) 332-5800						
7. NUMBER & TYPE OF CONTAINER 87-55 Gallon Drum	8. GALLONS 4785	9. WASTE NAME Waste Flammable Liquid		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE D001	14. SHIPPING WEIGHT (Pounds) 39,150
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Floyd Lynels</i>		16. NAME (Print) Floyd Lynels		17. DATE SHIPPED M / D / Y 1 / 1

TRANSPORTER SECTION			
18. COMPANY NAME Southeastern Waste Treatment, Inc.		19. EPA IDENTIFICATION NO. GA000222083	
20. P.O. BOX OR STREET ADDRESS 1015 New South Harris Street			
21. CITY, STATE, ZIP CODE Dalton, GA 30720		22. TELEPHONE NUMBER (404) 278-0091	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) [Name]	26. Date Accepted M / D / Y 10 / 18 / 82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical Services, Inc.		33. EPA IDENTIFICATION NO. IND-16360265	
34. P.O. BOX OR STREET ADDRESS 421 South Colfax Avenue			
35. CITY, STATE, ZIP CODE Griffith, IN		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Bob Mauck</i>	39. NAME (Print) BOB MAUCK	40. Date Accepted 10 / 18 / 82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

On dock 10.8.82

A 06972

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milprint Inc.		2. EPA IDENTIFICATION NO. WID-000068155		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O. Box 454								
5. CITY, STATE, ZIP CODE Milwaukee, WI 53201		6. TELEPHONE NUMBER (414) 332-5800						
7. NUMBER & TYPE OF CONTAINER 87-55 Gallon Drum	8. GALLONS 4785	9. WASTE NAME Waste Flammable Liquid		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE D001	14. SHIPPING WEIGHT (Pounds) 39,150
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>[Signature]</i>		16. NAME (Print) Floyd Lynels		17. DATE SHIPPED M / D / Y / /

TRANSPORTER SECTION

18. COMPANY NAME Southeastern Waste Treatment, Inc.		19. EPA IDENTIFICATION NO. GA000222083	
20. P.O. BOX OR STREET ADDRESS 1015 New South Harris Street			
21. CITY, STATE, ZIP CODE Dalton, GA 30720		22. TELEPHONE NUMBER (404) 278-0091	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) DANIEL GIBSON	26. Date Accepted M / D / Y 10 / 12 / 82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Services, Inc.		33. EPA IDENTIFICATION NO. IND-16360265	
34. P.O. BOX OR STREET ADDRESS 421 South Colfax Avenue			
35. CITY, STATE, ZIP CODE Griffth, IN		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) Bob M. M. M.	40. Date Accepted M / D / Y 10 / 13 / 82	
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

Ondock 10/12/82

27 to 204 T-50
60 to Solid Mix T-50

10-15-82 CLOP

002406

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER

A 06973

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milprint Inc.		2. EPA IDENTIFICATION NO. WTD-000068155		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O. Box 454								
5. CITY, STATE, ZIP CODE Milwaukee, WI				6. TELEPHONE NUMBER (414) 332-5800				
7. NUMBER & TYPE OF CONTAINER 87-55 Gallon Drum	8. GALLONS 4785	9. WASTE NAME Waste Flammable Liquid		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER DN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE D001	14. SHIPPING WEIGHT (Pounds) 39,150
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Floyd Lyness</i>		16. NAME (Print) Floyd Lyness		17. DATE SHIPPED M / D / Y 1 - 1

TRANSPORTER SECTION

18. COMPANY NAME Southeastern Waste Treatment, Inc.		19. EPA IDENTIFICATION NO. CA000222083	
20. P.O. BOX OR STREET ADDRESS 1015 New South Harris Street			
21. CITY, STATE, ZIP CODE Dalton, GA 30720		22. TELEPHONE NUMBER (404) 278-0091	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Services, Inc.		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 421 South Colfax Avenue			
35. CITY, STATE, ZIP CODE Griffith, IN		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>F. Dunfee</i>	39. NAME (Print) FDUNFEE	40. Date Accepted M / D / Y 10 / 1 / 82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

On dock 10/1/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER

A 52323

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION			
1. COMPANY NAME Milprint Inc.		2. EPA IDENTIFICATION NO. WID-000068155	
3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS P.O. Box 454			
5. CITY, STATE, ZIP CODE Milwaukee, Wisconsin 53201		6. TELEPHONE NUMBER (414) 332-5800	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS
20-55 Gallon drum 1100		Waste Flammable Liquid	Flammable Liquid
			11. US DOT IDENTIFICATION NUMBER UN1993
			12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid
			13. US EPA WASTE CODE D001
			14. SHIPPING WEIGHT (Pounds) 9000
15. AUTHORIZED SIGNATURE <i>[Signature]</i> Floyd E. Lynels			
16. NAME (Print) Floyd E. Lynels			
17. DATE SHIPPED M / D / Y 8 / 17 / 82			

TRANSPORTER SECTION		
18. COMPANY NAME Southeastern Waste Treatment, Inc.		19. EPA IDENTIFICATION NO. GAD000222083
20. P.O. BOX OR STREET ADDRESS 1015 New South Harris Street		
21. CITY, STATE, ZIP CODE Dalton, Georgia 30720		22. TELEPHONE NUMBER (404) 278-0091
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) Willard King	26. Date Accepted 8 / 17 / 82
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical Services, Inc.		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 421 South Colfax Avenue		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) GEORGE MURPHY	40. Date Accepted 8 / 17 / 82
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE		44. NAME (Print)
		45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TO DNR T-50

002400

SOUTHEASTERN WASTE TREATMENT, INC.

P.O. BOX 1697 • DALTON, GEORGIA 30720 • 404-278-0091

Offices:

441 N. Hamilton St.

Plants:

No. 1 1015 New S. Harris St.

No. 2 1025 New S. Harris St.

HAZARDOUS WASTE MANIFEST
STATE OF GEORGIAManifest
Document No.

G A 0 0 7 2 8

Date issued:

8 / 12 / 82

IDENTIFICATION INFORMATION

EPA ID Number	NAME	MAILING ADDRESS	TELEPHONE
Generator WID000068155	Millprint, Inc.	4200 N. Holton Street Milwaukee, WI 53201	414/332-5800
Transporter # 1 GAD000222083	Southeastern Waste Treatment, Inc.	P. O. Box 1697 Dalton, GA 30720	404/278-0091
Transporter # 2			
TSDF* IND016360265	American Chemical Services	420 South Colfax Griffith, IN 46319	219/924-4370

WASTE INFORMATION

Containers		DOT Shipping Name, Class & I.D. Number	Total Quantity	Weight	EPA Hazardous Waste	
No	Type				Number	Code
20	Drums	Waste flammable liquid NOS UN1993			D001	I

EMERGENCY INFORMATION

NATIONAL RESPONSE CENTER: 1-800-424-8802

GENERATOR: (414) 332-5800

GEORGIA ENVIRONMENTAL PROTECTION DIVISION: (404) 656-4300

DISPOSER: (219) 924-4370

COMMENTS — SPECIAL HANDLING

CERTIFICATIONS

This is to certify that the above-named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation, the U.S. Environmental Protection Agency, and the Georgia Department of Natural Resources.

Skip Schneble

Authorized Representative of Generator

Signature

8/17/82

Date:

This is to certify acceptance of the hazardous waste shipment described above.

Southeastern Waste Treatment, Inc.

Authorized Representative or Transporter-1

Signature

8-17-82

Date:

Authorized Representative or Transporter-2

Signature

Date:

This is to certify acceptance of the hazardous waste shipment described above for

☐ T ☐ S ☐ D

Walt Wagoner

Authorized Representative of TSDF

Signature

8-19-82

Date:

*Treatment, Storage or Disposal Facility

002399 COPY 1



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.	
3. Generator's Name and Mailing Address MILSCO MFG. CO. 9009 N. 51st. STREET - MILWAUKEE, WISCONSIN		4. Generator's Phone (414) 354-0500		53223		
5. Transporter 1 Company Name E&K HAZARDOUS WASTE SERVICES, INC.		6. Use EPA ID Number W I D 9 8 2 2 1 9 5 2 9		A. State Manifest Document Number INA 0309607		
7. Transporter 2 Company Name		8. Use EPA ID Number		B. State Generator's ID		
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICES 420 S. COLFAX GRIFFITH, IN 46319		10. Use EPA ID Number I N D 0 1 6 3 6 0 2 6 5		C. State Transporter's ID #11608		
				D. Transporter's Phone (414) 458-6030		
				E. State Transporter's ID		
				F. Transporter's Phone		
				G. State Facility's ID		
				H. Facility's Phone (219) 924-4370		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers	13. Total Quantity	14. Unit Wt/Vol.	L. Waste No.	
a. "RQ", WASTE FLAMMABLE LIQUID, N.O.S., FLAMMABLE LIQUID, UN1993, (EPA IGNITABILITY, P003).		No. Type			F 0 0 3	
b. "RQ", WASTE ADHESIVE, FLAMMABLE LIQUID, P-001 UN1133, (EPA IGNITABILITY).					D 0 0 1	
c.						
d.						
J. Additional Descriptions for Materials Listed Above 11a. - ALSO D001		K. Handling Codes for Wastes Listed Above				
15. Special Handling Instructions and Additional Information NOTIFY CBC TRANSPORT (414) 764-7005 WITH ANY LOAD DISCREPANCIES. (OFF SPEC. MATERIAL)						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, If I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Jeffrey D. Swenson		Signature <i>Jeffrey D. Swenson</i>		Month Day Year 05/12/89		
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature <i>Kenneth P. Weiss</i>		Month Day Year 05/17/89		
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.						
Printed/Typed Name ARVIN WHITAKER		Signature <i>Arvin Whitaker</i>		Month Day Year 5/19/89		

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

2A 204 TSD 5/22 20
SA 204 TSD 5/22 20
BA 204 TSD 5/22 20

0017044

INA 0309607

In case of a spill call the Indiana Office of Environmental Response at 800/424-8802 or 202/426-2675.

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0626

Authorization Number 92094

MILTON INDUSTRIES INC 4500 W. CORTLAND 312 235 9400 0316000972
(Company Name) Address Phone Number Generator Number
CHICAGO IL 60639 1LD005086251
City State Zip EPA Number

WASTE HAULER(S)

ROSKIN MOTOR SERVICE 4710 W. ROOSEVELT RD.
Hauler Name Hauler Address
CHICAGO, IL 312 261 7236 1LD045695715
Phone Number EPA Number

S.W.H. Registration Number 1400004

S.W.H. Registration Number 32

AMERICAN CHEMICAL SERVICE
(Facility Name) Address
GRIFFITH IND. 46319 219 924 4370 1ND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PERCHLORETHYLENE WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION

HAZARD CLASS

WASTE SOLVENT

CHLORINATED
SOLVENT
12 ORM-E

UN1897
UN or NA Number

F001
EPA HW Number

WEIGHT FOR D.O.T. USE 800 TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 000110 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS 2)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 11-15-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Chad Valentin
(Authorized Signature)

DATE: 11/16/83

(2) Ray Zahn
(Authorized Signature)

DATE: 11/16/83

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE: YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 11/17/83

COMMENTS OR SPECIAL INSTRUCTIONS:

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0628846

Authorization Number

8 13

MILTON INDUSTRIES INC. 4500 W. PORTLAND 312 2359400 031 6000972 0
(Company Name) Address Phone Number 14 Generator Number 24
CHICAGO ILLINOIS 60639 123005086251
City State Zip EPA Number

WASTE HAULER(S)

ROSKIN MOTOR SERVICE 4710 W. ROOSEVELT RD. 312 2617236 1400004
Hauler Name Hauler Address Phone Number S.W.H. Registration Number 25 31
CHICAGO, IL. 123045695715
EPA Number

Hauler Name Hauler Address Phone Number S.W.H. Registration Number 32 38
EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 91808902
(Facility Name) Address 39 Site Number 40
GRIFFITH INDIANA 46319 219 9244370 IND 016560265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 40
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PERCHLOROETHYLENE

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE SOLVENT

CHLORINATED
SOLVENT 12 ORH-E

UN1897
UN or NA Number

F001
EPA HW Number

WEIGHT FOR D.O.T. USE 1182 TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 000165 GALLONS (Circle One)
47 52 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS 3) Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

J. Musick
(Authorized Signature)

DATE: 1-25-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) H. P. ...
(Authorized Signature)

DATE: 2/28/83

(2) ...
(Authorized Signature)

DATE: 1/1/83

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Bob Mauck
(Authorized Signature)

DATE: 02/28/83

COMMENTS OR SPECIAL INSTRUCTIONS:

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0628847

Authorization Number 320-244
8 13

MILTON INDUSTRIES INC 4500 W. CORTLAND 312 235 9400 0316 000 972 G
(Company Name) (City) (State) (Zip) (Phone Number) (14) (Generator Number) (24)
CHICAGO IL 60639 1 L D005086251
City State Zip EPA Number

WASTE HAULER(S)

ROSKIN MOTOR SERVICE 4710 W. ROOSEVELT CHICAGO IL 312 261 7236 1 L D045695715
Hauler Name Hauler Address (City) (State) (Zip) (Phone Number) EPA Number
S.W.H. Registration Number 1400004 25 31

Hauler Name Hauler Address (City) (State) (Zip) (Phone Number) EPA Number
S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE GRIFFITH IND 46319 219 924 4370 IND 016 360 265
(Facility Name) (City) (State) (Zip) (Phone Number) EPA Number
Address (City) (State) (Zip) (Phone Number) EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PERCHLOROETHYLENE WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: WASTE SOLVENT HAZARD CLASS: CHLORINATED SOLVENT 12ORM-E UN or NA Number: UN1897 EPA HW Number: F001

WEIGHT FOR D.O.T. USE: 800 TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 000110 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 2) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) DATE: 5-4-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) H. R. ... (Authorized Signature) DATE: 5-4-83
(2) (Authorized Signature) DATE: 5-4-83

DISPOSAL, STORAGE, OR TREATMENT FACILITY

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: HAZARDOUS WASTE SUBJECT TO FEE YES NO X
(Authorized Signature) DATE: 5/19/83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0628849

Authorization Number 920941

MILTON INDUSTRIES INC 4500 W. CORTLAND 312-235-9400 0316000972
(Company Name) Address Phone Number Generator Number
CHICAGO IL 60639 1LD005086251
City State Zip EPA Number

WASTE HAULER(S)

ROSKIN MOTOR SERVICE 4710 W. ROOSEVELT RD. S.W.H. Registration Number 1400004
Hauler Name Hauler Address
CHICAGO IL 3122617236 1LD045695715
Phone Number EPA Number

Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL 91808902
(Facility Name) Address Site Number
GRIFFITH IND. 46319 2199244370 IND016360865
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: PERCHLORETHYLENE WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS

WASTE SOLVENT

CHLORINATED SOLVENT
120RM-E

UN1897
UN or NA Number

F001
EPA HW Number

WEIGHT FOR D.O.T. USE 800 TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 000110 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS 2) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

[Signature]
(Authorized Signature)

DATE: 8-17-83

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [Signature]
(Authorized Signature)
(2) [Signature]
(Authorized Signature)

DATE: 8/18/83
DATE: 8/18/83

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 8-23-83

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 4

SITE COPY - PART 3

To 118K T-63 GRM 9-21-83

005021

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0628853

Authorization Number 920944

MILTON IND. INC. 4500 W. CORTLAND 3122359400 0316000972
(Company Name) Address Phone Number Generator Number
CHICAGO IL 60639 ILD005086251
City State Zip EPA Number

WASTE HAULER(S)

ROSKIN MOTOR SERVICE 4710 W. ROOSEVELT RD. 1400004
Hauler Name Hauler Address S.W.H. Registration Number
CHICAGO IL 3122359400 LLD045695715
City State Zip Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 9180892
(Facility Name) Address Site Number
GRIFFITH IND. 46319 2199244370 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PERCHLORETHYLENE

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE SOLVENT

CHLORINATED
SOLVENT
12ORM-E

UN1897
UN or NA Number

F001
EPA HW Number

WEIGHT FOR D.O.T. USE 400 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: 000055 0 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS 1) Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 1-18-84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 1/18/84

(2) (Authorized Signature)

DATE: 1/18/84

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 1/23/84

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV # 4

SITE COPY - PART 3

TO 120E T-63 ERW 1-23-84

005022

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFESTAuthorization Number 920944

MILTON INDUSTRIES 4500 W. CORTLAND 312 2359400 0316000972
(Company Name) Address Phone Number Generator Number
CHICAGO IL 60639 1LD005086251
City State Zip EPA Number

WASTE HAULER(S)

ROSKIN MOTOR SERVICE 4710 W. ROOSEVELT RD.
Hauler Name Hauler Address
CHICAGO IL 312 2617236 1LD045695715
City State Zip Phone Number EPA Number

S.W.H. Registration Number 1400004

Hauler Name Hauler Address
Phone Number EPA Number

AMERICAN CHEMICAL SERVICE
(Facility Name) Address
GRIFFITH IND 46319 219 9244370 1ND016360265
City State Zip Phone Number EPA Number

91808902
Site Number

Alternate (Facility Name) Address
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATORWASTE NAME: PERCHLORETHYLENEWASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:
CHLORINATED
SOLVENT
120RM-EUN1897
UN or NA NumberF001
EPA HW NumberWEIGHT FOR
D.O.T. USE 800 100
TONS (circle one)WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.QUANTITY OF WASTE DELIVERED: 000110 0 GALLONS (Circle One)
CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS 03)

Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

[Authorized Signature]

DATE: 4-6-84

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) [Authorized Signature]

DATE: 5/10/8

(2) [Authorized Signature]

DATE: 5/22/8

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

DATE: 5/22/8

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

OUTSIDE ILLINOIS: 800 / 424-8802 or

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV. # 4

SITE COPY - PART 3

119K 7-63

00687



STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

E532-0610

LPC 62 8/81

Print or Type

(Form designed for use on elite (12-pitch) typewriter.)

EPA Form 8700-22 (3-84)

Form Approved OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. 1 LD005086251	Manifest Document No. 0003	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but is required by Illinois law.		
3. Generator's Name and Mailing Address MILTON INDUSTRIES 4500 W. CORTLAND CHICAGO, IL - 60639				A. Illinois Manifest Document Number IL 1191532			
4. Generator's Phone (312) 235-9400				B. Illinois Generator's ID 0316005972			
5. Transporter 1 Company Name ROSKIN MOTOR SERVICE				C. Illinois Transporter's ID 08122617236			
6. US EPA ID Number 1 LD045695715				D. Transporter's Phone 1400			
7. Transporter 2 Company Name				E. Illinois Transporter's ID 1400			
8. US EPA ID Number				F. Transporter's Phone			
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERV. GRIFFITH, IND. 46319				G. Illinois Facility's ID 01180890002			
10. US EPA ID Number IND016360265				H. Facility's Phone 2939244370			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers	13. Total Quantity	14. Unit	15. Waste No.
a. PERCHLORETHYLENE CHLORINATED SOLVENT 120RM-E UN 1897				3	DM	00165	EPA HW Number F0001
b.							EPA HW Number Authorization Number
c.							EPA HW Number Authorization Number
d.							EPA HW Number Authorization Number
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.							
Printed/Typed Name JERRY MIRSHAK				Signature Jerry Mirshak		Date 01/07/85	
17. Transporter 1 Acknowledgement of Receipt of Materials				Printed/Typed Name H. ROSKIN CHARENCE		Signature H. Roskin Charence	
18. Transporter 2 Acknowledgement or Receipt of Materials				Printed/Typed Name		Signature	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.				Printed/Typed Name FRANK PRICE		Signature Frank Price	
						Date 1/28/85	

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY

PART - 4 TRANSPORTER

PART - 5 IEPA

PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111 1/2 Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed \$25,000 per day of violation. Fabrication of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

Hold 122 K

008972



STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type.

(Form designed for use on elite (12-pitch) typewriter.)

EPA Form 8700-22 (3-84)

Form Approved. OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. 1LD005086251	Manifest Document No. 60006	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but is required by Illinois law.	
3. Generator's Name and Mailing Address MILTON INDUSTRIES 4500 W. CORTLAND CHICAGO, IL - 60615				A. Illinois Manifest Document Number IL 1191534		
4. Generator's Phone (312) 235-9400				B. Illinois Generator's ID 0316005972		
5. Transporter 1 Company Name ROSKIN MOTOR SERV-				C. Illinois Transporter's ID 0812-261-7236		
6. US EPA ID Number 1LD045695715				D. Transporter's Phone 1409		
7. Transporter 2 Company Name				E. Illinois Transporter's ID 1409		
8. US EPA ID Number				F. Transporter's Phone		
9. Designated Facility Name and Site Address AMERICAN GRIFFITH CHEM. < SERVICE GRIFFITH, IND - 46319				G. Illinois Facility's ID 9180890002		
10. US EPA ID Number IND016360265				H. Facility's Phone 219-924-4370		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.	
a. HM PERCHLORETHYLENE CHLORINATED SOLVENT 120M-E UN 1897		No. Type			EPA HW Number FOO1	
b.					Authorization Number	
c.					EPA HW Number	
d.					Authorization Number	
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above				
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.						
Printed/Typed Name JERRY MIRSHAK		Signature Jerry Mirshak		Date 03/20/85		
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature		Date		
Printed/Typed Name		Signature		Month Day Year		
18. Transporter 2 Acknowledgement or Receipt of Materials		Signature		Date		
Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name FRANK PRICE		Signature Frank Price		Date 4/12/85		

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111 1/2 Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the generator or operator of not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Federal Center.

FACILITY COPY - PART 3

122E T-63

008973



STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type.

(Form designed for use on elite (12-pitch) typewriter.)

EPA Form 8700-22 (3-84)

Form Approved, OMB No. 2000-0404, Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but is required by Illinois law.
3. Generator's Name and Mailing Address		MILTON INDUSTRIES 4500 W. CORTLAND CHICAGO, IL - 60609		A. Illinois Manifest Document Number IL 1191535	
4. Generator's Phone (312) 235-9400		6. US EPA ID Number ILD0045695715		B. Illinois Generator's ID 0316005972	
5. Transporter 1 Company Name ROSKIN MOTOR SERVICE		8. US EPA ID Number		C. Illinois Transporter's ID 031212617236	
7. Transporter 2 Company Name		10. US EPA ID Number		E. Illinois Transporter's ID 1400	
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE GRIFFITH IND - 4639		11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		F. Illinois Facility's ID 180890002	
		12. Containers		13. Total Quantity	
		No. Type		Unit	
a. PERCHLORETHYLENE CHLORINATED SOLVENT 1202M-E UN 1897		35 2 DM		1051	
b. CHLORINATED SOLVENT 1202M-E					
c. CHLORINATED SOLVENT 1202M-E					
d. CHLORINATED SOLVENT 1202M-E					
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.					
Printed/Typed Name JERRY MIRSHAK		Signature Jerry Mirshak		Date 07/22/85	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature Clarence Neal		Date 07/22/85	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Date	
19. Discrepancy Indication Space					
20. Facility Owner, or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.		Signature Frank Price		Date 17/06/85	

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA

PART - 3 FACILITY

PART - 4 TRANSPORTER

PART - 5 IEPA

PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111 1/2 Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

120 K T-63

008974



Please print or type.

(Form designed for use on elite (12-pitch) typewriter)

EPA Form 8700-22 (3-84)

Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. 1LD005086251	Manifest Document No. 0000	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but is required by Illinois law.
3. Generator's Name and Mailing Address MILTON INDUSTRIES 4500 W. CORTLAND CHICAGO, IL - 60639				A. Illinois Manifest Document Number 1115266	
4. Generator's Phone (312) 235-9400				B. Illinois Generator's ID 0316005972	
5. Transporter 1 Company Name ROSKIN MOTOR SERVICE				6. US EPA ID Number 11LD045695715	
7. Transporter 2 Company Name				8. US EPA ID Number	
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE GRIFFITH, IND - 46319				10. US EPA ID Number IND016360265	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers	13. Total Quantity
				No.	Type
a. PERCHLORETHYLENE CHLORINATED SOLVENT 1202M-E UN 1897				3	DM 1.65
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above	
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.					
Printed/Typed Name JERRY MIRSHAK				Signature Jerry Mirshak	
17. Transporter 1 Acknowledgement of Receipt of Materials				Date Month Day Year 10/17/84	
Printed/Typed Name A. F. W. W. W.				Signature A. F. W. W. W.	
18. Transporter 2 Acknowledgement or Receipt of Materials				Date Month Day Year	
Printed/Typed Name				Signature	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name FDUNFEE				Signature FDunfee	
				Date Month Day Year 11/19/84	

IN ILLINOIS: 217 / 782-3637

*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111 1/2 Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed \$25,000 per day of violation. Failure to provide the information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

122 RT-63

008971



STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

EPA Form 8700-22 (3-84)

Form Approved OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ILD005086251	Manifest Document No. 00010	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but is required by Illinois law.
3. Generator's Name and Mailing Address MILTON INDUSTRIES 4500 W. CORTLAND CHICAGO, IL - 60639				A. Illinois Manifest Document Number IL 1320177	
4. Generator's Phone (312) 235-9400				B. Illinois Generator's ID 10316095972	
5. Transporter 1 Company Name ROSKIN MOTOR SERVICE				C. Illinois Transporter's ID 312-261-7236	
6. US EPA ID Number ILD045695715				D. Transporter's Phone	
7. Transporter 2 Company Name				E. Illinois Transporter's ID 1400	
8. US EPA ID Number				F. Transporter's Phone	
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE GRIFFITH, IND. 46319				G. Illinois Facility's ID 180890002	
10. US EPA ID Number IND06360265				H. Facility's Phone 219-424-4370	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. PERCHLOROETHYLENE CHLORINATED SOLVENT 120RM-E UN 1897		002	DM	00110	1
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above	
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.					
Printed/Typed Name JERRY MIRSHAK				Signature Jerry Mirshak	
Date 10/07/85				Month Day Year	
17. Transporter 1 Acknowledgement of Receipt of Materials				Date	
Printed/Typed Name				Signature	
Date 10/07/85				Month Day Year	
18. Transporter 2 Acknowledgement or Receipt of Materials				Date	
Printed/Typed Name SMITH				Signature	
Date 10/07/85				Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name FDUNFEE				Signature FDunfee	
Date 10/22/85				Month Day Year	

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS*

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111 1/2 Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

161d + 63
008975



STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type.

(Form designed for use on elite (12-pitch) typewriter.)

EPA Form 8700-22 (3-84)

Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. ILD005086251	Manifest Document No. 100012	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but is required by Illinois law.
3. Generator's Name and Mailing Address MILTON INDUSTRIES 4500 W-CORTLAND CHICAGO, IL - 60639		Allinois Manifest Document Number IL 1320179			
4. Generator's Phone (312) 235-9400		Illinois Generator's ID 10316005972			
5. Transporter 1 Company Name ROSKIN MOTOR SERVICE		6. US EPA ID Number ILD045695715		Illinois Transporter's ID D(312) 261-7236	
7. Transporter 2 Company Name		8. US EPA ID Number		Illinois Transporter's ID F(135) 114010	
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE GRIFFITH, IND - 46319		10. US EPA ID Number IND016360265		Illinois Facility's ID 91180890902	
				Illinois Facility's Phone	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type		13. Total Quantity	14. Unit Wt/Vol
a. PERCHLORETHYLENE CHLORINATED SOLVENT 1202M-E UN1897		002 DM 001110			
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.					
Printed/Typed Name JERRY MIRSHAK		Signature <i>Jerry Mirshak</i>		Date Month Day Year 11 21 1985	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature <i>[Signature]</i>		Date Month Day Year	
18. Transporter 2 Acknowledgement or Receipt of Materials		Signature <i>[Signature]</i>		Date Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.		Signature <i>John Hardin</i>		Date Month Day Year 12 13 1985	

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111h Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed \$25,000 per day of violation. Facilitation of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Forms Management Center.

FACILITY COPY - PART 3

Hold T-63 ✓

008976

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

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Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law
3. Generator's Name MILTON INDUSTRIES 4500 W CORTLAND CHGO IL 60639		1. Generator's US EPA ID No. 11LD1905D862511	Manifest Document No. 1	2. Page 1 of	Information in the shaded areas is not required by Federal law
4. Generator's Phone 312 235 9400		A. State Manifest Document Number IN 089263		B. State Generator's ID 0316005972	
5. Transporter 1 Company Name H. ROSKIN MOTOR		6. US EPA ID Number 11LD0041509157115	C. State Transporter's ID 1400	D. Transporter's Phone 312 261 9236	
7. Transporter 2 Company Name		8. US EPA ID Number	E. State Transporter's ID	F. Transporter's Phone	
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE GRIFFITH IN 46319		10. US EPA ID Number 11MD1011636142165	G. State Facility's ID 9180890002	H. Facility's Phone 312 768 3400	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. PERCHLOR ORN-A UN 1897		No. Type 1 2 DM	11 AD	1	FOO1
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above 1 = GALLONS			
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.					
Printed/Typed Name JERRY MIRSAAK		Signature [Signature]		Month Day Year 14 06 87	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature [Signature]		Date 01/04/87	
Printed/Typed Name CLARENCE NEAL		Signature [Signature]		Month Day Year 01 04 87	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Date	
Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.					
Printed/Typed Name [Signature]		Signature [Signature]		Month Day Year 01 04 87	

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

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Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal law	
3. Generator's Name MILTON INDUSTRIES INC. 4500 CORTLAND ST. CHICAGO IL 60630		6. US EPA ID Number 1K220W156157115		A. State Manifest Document Number IN 089220		B. State Generator's ID 0316005772		C. State Transporter's ID 1400	
4. Generator's Phone 773 255-7400		8. US EPA ID Number		D. Transporter's Phone 773-241-7236		E. State Transporter's ID		F. Transporter's Phone	
5. Transporter 1 Company Name Perry Motor Freight		10. US EPA ID Number		G. State Facility's ID 0150890002		H. Facility's Phone 219-924-4370			
7. Transporter 2 Company Name		9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE GRIFFITH IND 46030		12. Containers		13. Total Quantity		14. Unit Wt/Vol	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		No.		Type		Quantity		Unit Wt/Vol	
a. PERCHLOROETHYLENE CHLORINATED SOLVENT 1200ME		COR		DM		001110		G. FOOT	
b. TRICHLOROETHANE 111 TR ORM-A UN2351		COR		DM		002VV0		G. FOOT	
c.									
d.									
J. Additional Descriptions for Materials Listed Above TRI-ETHANE 366		K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.		Printed/Typed Name JERRY MISHAK		Signature [Signature]		Month Day Year			
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name WILLIAM SMITH		Signature [Signature]		Month Day Year			
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature		Month Day Year			
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.		Printed/Typed Name [Signature]		Signature [Signature]		Month Day Year			

EPA Form 8700-22A (Rev. 11-85)

T.S.D. DETACH AND RETAIN THIS COPY

UHW 2/LP2

012848

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

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Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal law	
3. Generator's Name MILTON INDUSTRIES INC. 4500 W. CORTLAND ST. CHICAGO, IL 60639		6. US EPA ID Number 11120005051515151515		A. State Manifest Document Number IN 089221		B. State Generator's ID 0316005972			
4. Generator's Phone 312 235-7400		5. Transporter 1 Company Name ROCKWELL MOTOR FREIGHT		7. Transporter 2 Company Name		C. State Transporter's ID 1400		D. Transporter's Phone 312-261-7240	
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE GREENFITH, IND. 46219		8. US EPA ID Number 11120005051515151515		10. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. PERCHLOROETHYLENE CHLORINATED SOLVENT 1202		No. Type		Quantity		Unit Wt/Vol		Waste No.	
b. TRICHLOROETHANE 1112 ORM-A UN 2381		No. Type		Quantity		Unit Wt/Vol		Waste No.	
c.		No. Type		Quantity		Unit Wt/Vol		Waste No.	
d.		No. Type		Quantity		Unit Wt/Vol		Waste No.	
J. Additional Descriptions for Materials Listed Above TRI-ETHANE 366		K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.									
Printed/Typed Name JERRY MIRSHAK				Signature [Signature]				Month Day Year	
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature [Signature]				Month Day Year	
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature [Signature]				Month Day Year	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.									
Printed/Typed Name HAROLD F. SCHMIDT				Signature [Signature]				Month Day Year 07 25 86	

EPA Form 8700-22A (Rev. 11-85)

T.S.D. DETACH AND RETAIN THIS COPY

1-1314 T62 15 UHWM 2/LP2
2-12-15 T62 15

012849

IN 089221

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

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Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law
3. Generator's Name MILTON INDUSTRIES INC - 4500 W. CORTLAND ST. CHICAGO, IL 60639		1KDD00503625100004		A. State Manifest Document Number IN 089222	
4. Generator's Phone 312 335-2400		5. US EPA ID Number		B. State Generator's ID 0316005922	
5. Transporter 1 Company Name FEDERAL MOTOR FREIGHT		6. US EPA ID Number 1KDKK1561157115		C. State Transporter's ID 1400	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 312-261-9234	
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE GRIFFITH IND- 46319		10. US EPA ID Number 1WMD016360265		E. State Transporter's ID	
				F. Transporter's Phone	
				G. State Facility's ID 9180890002	
				H. Facility's Phone 312-768-3400	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity	14. Unit Wt/Vol
		No.	Type		
a. PERCHLOROETHYLENE CHLORINATED SOLVENT 1B RM E		002	DM 001110		FOOI
b. TRICHLOROETHANE 111R RM-A UN 2381		002	DM 001110		FOOI
c.					
d.					
J. Additional Descriptions for Materials Listed Above TRIETHANE 366		K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.					
Printed/Typed Name JERRY MURSHAK		Signature [Signature]		Month Day Year 10 01 87	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature		Date	
Printed/Typed Name		Signature		Month Day Year	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Date	
Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.					
Printed/Typed Name HAROLD F. Schmidt		Signature [Signature]		Month Day Year 10 01 87	

EPA Form 8700-22A (Rev. 11-85)

UHW 2/LP2

20-132 T-63 11/10/87
20-142 T-63 11/10/87

T.S.D. DETACH AND RETAIN THIS COPY

012850

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law
3. Generator's Name MILTON INDUSTRIES INC. 4500 W. HORTLAND ST. CHICAGO IL 60644-4029		1KDKK50F4251KCKK05		A. State Manifest Document Number IN 089223	
4. Generator's Phone 312 225-9400		6. US EPA ID Number		B. State Generator's ID 031K005972	
5. Transporter 1 Company Name RICHMOND MATHE FREIGHT		7. US EPA ID Number 1KDKK50F4251KCKK05		C. State Transporter's ID 1400	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 312-221-1274	
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE 2115 E. 11TH AVE. CHICAGO IL 60648		10. US EPA ID Number 1KDKK50F4251KCKK05		E. State Transporter's ID	
				F. Transporter's Phone	
				G. State Facility's ID 9180890002	
				H. Facility's Phone 312-766-3400	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity	14. Unit Wt/Vol
		No.	Type		
a. PERCHLOROETHYLENE CHLORINATED SOLVENT 1202		002	DRUM	00000	FOOT
b. TRICHLOROETHANE 111R GRAV UN 2881		002	DRUM	00000	FOOT
c.					
d.					
J. Additional Descriptions for Materials Listed Above TRI-ETHANE 366		K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.					
Printed/Typed Name JERRY MIRSHAK		Signature [Signature]		Month Day Year 12 17 87	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature [Signature]		Date 12 17 87	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Date	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.					
Printed/Typed Name HAROLD F. Schmitt		Signature [Signature]		Month Day Year 12 12 87	

EPA Form 8700-22A (Rev. 11-85)

26-187 T03 2/3/87
26-187 T03 2/3/87

T.S.D. DETACH AND RETAIN THIS COPY

UHW 2/LP2

IN 089223

012851

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law
3. Generator's Name MILTON INDUSTRIES 4500 W. CORTLAND ST. CHICAGO, IL - 60639		1 LD005PB6R5100001		A. State Manifest Document Number IN 089228	
4. Generator's Phone (312) 235-9400		6. US EPA ID Number		B. State Generator's ID 0316005972	
5. Transporter 1 Company Name ROSKIN MOTOR FREIGHT		7. US EPA ID Number 1 LD0456957V5		C. State Transporter's ID 1400	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 312-261-7236	
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE GRIFFITH, IND - 46319		10. US EPA ID Number VMDPV6360265		E. State Transporter's ID	
				F. Transporter's Phone	
				G. State Facility's ID 9180890002	
				H. Facility's Phone 312-768-3400	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity	14. Unit Wt/Vol
		No.	Type		Waste No.
a. PERCHLOROETHYLENE CHLORINATED SOLVENT 12 ORME		003	DM	010165	GAL. FOOL
b. TRICHLOROETHANE III TR ORM-A UN 2381		002	DM	010110	GAL FOOL
c.					
d.					
J. Additional Descriptions for Materials Listed Above TRI-ETHANE 366		K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.					
Printed/Typed Name JERRY MIRSHAK		Signature <i>[Signature]</i>		Month Day Year 01/01/88	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature <i>[Signature]</i>		Date	
Printed/Typed Name		Signature		Month Day Year	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Date	
Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.					
Printed/Typed Name MICHAEL F. SCHMIDT		Signature <i>[Signature]</i>		Month Day Year 04/27/88	

EPA Form 8700-22A (Rev. 11-85)

3A-1A T63 S/M
2B-1A T63 S/M

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UHW 2/LP2

IN 089228

0015832

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

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Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal law	
3. Generator's Name MILTON INDUSTRIES INC. 4500 W. GASTLAND ST. CHICAGO IL 60639		6. US EPA ID Number 111200156757V5		A. State Manifest Document Number IN 089229		B. State Generator's ID 0316005972			
4. Generator's Phone (312) 335-0400		5. Transporter 1 Company Name RICKMAN FREIGHT		8. US EPA ID Number 111200156757V5		C. State Transporter's ID 1100		D. Transporter's Phone 312-261-7236	
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone			
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE GRIFFITH, IND. 46319		10. US EPA ID Number 111200156757V5		G. State Facility's ID 9180890002		H. Facility's Phone 312-268-3400			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. PERCHLOROETHYLENE CHLORINATED SOLVENT NORME		003 DM 00V65 GAL F001							
b. TRICHLOROETHANE ORM-A UN 2811		003 DM 00V10 GAL F001							
c.									
d.									
J. Additional Descriptions for Materials Listed Above TRI-ETHANE 366		K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.									
Printed/Typed Name JERRY WILSON		Signature [Signature]		Month 7/1		Day 1		Year 85	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature [Signature]		Month 7/1		Day 1		Year 85	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature [Signature]		Month 7/1		Day 1		Year 85	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.									
Printed/Typed Name MILTON P-100		Signature [Signature]		Month 7/1		Day 1		Year 85	

3A-1 RTG3 9/23/85 DETACH AND RETAIN THIS COPY 63 3/66

IN 089229

0015835

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IN 089230

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

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Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law
3. Generator's Name MILTON INDUSTRIES 4700 W. CENTER RD CHICAGO IL 60645		1142005000251		A. State Manifest Document Number IN 089231	
4. Generator's Phone 312 235-9400		6. US EPA ID Number 1142005000251		B. State Generator's ID 0316005972	
5. Transporter 1 Company Name ROSWIN METAL FREIGHT		7. Transporter 2 Company Name		C. State Transporter's ID 1420	
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE GRIFFITH IND 46319		10. US EPA ID Number 1142005000251		D. Transporter's Phone	
				E. State Transporter's ID	
				F. Transporter's Phone	
				G. State Facility's ID 9180890002	
				H. Facility's Phone 312-768-3400	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity	14. Unit Wt/Vol
a. TRICHLOROETHYLENE 111 ORM-A UN 3381 111TR		NO. TYPE		775	44L FOOT
b. PERCHLOROETHYLENE 1847 UN CALCULATED SOLVENT 111TR		NO. TYPE		775	44L FOOT
c.					
d.					
15. Special Handling Instructions and Additional Information		K. Handling Codes for Wastes Listed Above			
TRI-ETHANE 366					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.					
Printed/Typed Name JERRY MIRSINK		Signature Jerry Mirsink		Month Day Year 11/12/85	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature		Date	
Printed/Typed Name		Signature		Month Day Year	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Date	
Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.					
Printed/Typed Name W. H. T. K. A		Signature W. H. T. K. A		Month Day Year 11/16/85	

IN 089231



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

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(Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039 Expires 9-30-91

**UNIFORM HAZARDOUS
WASTE MANIFEST**

1. Generator's US EPA ID No.

1.LD0005084251

Manifest
Document No.

00001

2. Page 1

1 of 1

Information in the shaded areas is
not required by Federal law, but
items D, F, H and I are required by
State law.

3. Generator's Name and Mailing Address

MILTON INDUSTRIES
4500 W. CORTLAND
CHICAGO, IL 60639

A. State Manifest Document Number

INA 0322601

4. Generator's Phone

(312) 235-9400

B. State Generator's ID

5. Transporter 1 Company Name

ROSKIN MOTOR FREIGHT

6. Use EPA ID Number

1.LD0005084251

C. State Transporter's ID

1400

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

AMERICAN CHEMICAL SERVICE
GRIFFITH, IND. 46319

10. Use EPA ID Number

G. State Facility's ID

9180890002

H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers

No. Type

13. Total
Quantity

14. Unit
WT/Vol.

Waste No.

a. TRICHLOROETHANE

ORIGIN IN 2381 NITR

002 DM

001-10

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J. Additional Descriptions for Materials Listed Above

TRI-ETHANE 366

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

JERRY MURSHAK

Signature

Jerry Murshak

Month Day Year
04 02 89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

WILLIE S. H

Signature

Willie S. H

Month Day Year
04 02 89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year
04 02 89

19. Discrepancy Indication Space

A
2-120K T63 4/15
B
1-120K T63 4/15

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19

Printed/Typed Name

Harold F. Schmidt

Signature

Harold F. Schmidt

Month Day Year
04 04 89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA 0322601



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

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Form Approved. OMB No. 2050-0039. Expires 9-30-91

**UNIFORM HAZARDOUS
WASTE MANIFEST**

1. Generator's US EPA ID No.

1-LD-00508-625-1

Manifest
Document No.
00002

2. Page 1
1 of 1

Information in the shaded areas is
not required by Federal law, but
items D, F, H and I are required by
State law.

3. Generator's Name and Mailing Address

MILTON INDUSTRIES INC.
4500 IN. CORTLAND
CHICAGO, IL - 60639

A. State Manifest Document Number
INA 0322603

4. Generator's Phone (312) 235-9400

5. Transporter 1 Company Name

ROSKIN MOTOR FREIGHT

6. Use EPA ID Number

1-LD-04569-5715

B. State Generator's ID

C. State Transporter's ID 1400

D. Transporter's Phone 312-376-4343

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

AMERICAN CHEMICAL SERVICE
GRIFFITH, IND - 46319

10. Use EPA ID Number

1-LD-016360265

G. State Facility's ID

9180890002

H. Facility's Phone

312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers

No.

Type

13. Total
Quantity

Unit
WT/Vol.

14. Waste No.

a. TRICHLOROETHANE
ORM-A W2381 111TR

002 DM 00110 64K F0001

b. PERCHLOROETHYLENE 1897 UN
CHLORINATED SOLVENT 12ORME

002 DM 00110 3AL F0001

J. Additional Descriptions for Materials Listed Above

TRI ETHANE 366

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name

JERRY MIRSHAK

Signature

Jerry Mirshak

Month Day Year
9 9 1989

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

CLARENCE NEAL

Signature

Clarence Neal

Month Day Year
9 9 1989

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year
9 9 1989

19. Discrepancy Indication Space

A
2-1AET63 8/2/89

B
2-1ATCT63 8/8/89

20. Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name

HAROLD F. PLUMMER

Signature

Harold F. Plummer

Month Day Year
10 7 1989

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

INA0322603



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

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Form Approved. OMB No. 2050-0039. Expires 9-30-91

**UNIFORM HAZARDOUS
WASTE MANIFEST**

1. Generator's US EPA ID No.

Manifest
Document No.

2. Page 1

Information in the shaded areas is
not required by Federal law, but
items D, F, H and I are required by
State law.

3. Generator's Name and Mailing Address
**MILTON INDUSTRIES INC.
4500 W CORTLAND
CHICAGO, IL - 60195**

A. State Manifest Document Number
INA 0322604

4. Generator's Phone **(312) 235-9400**

B. State Generator's ID

5. Transporter 1 Company Name

6. Use EPA ID Number

C. State Transporter's ID

ROSKIN MOTOR FREIGHT

IL-D-04-5695715

D. Transporter's Phone **312-376-9343**

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

9. Designated Facility Name and Site Address

10. Use EPA ID Number

G. State Facility's ID

**AMERICAN CHEMICAL SERVICE
GRIFFITH IND - 46319**

IND-016360265

9180890002

H. Facility's Phone

312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers

13. Total
Quantity

14. Unit
Wt/Vol

15. Waste No.

a. **TRICHLOROETHANE**

ORM-A W2381 111TR

002 DM

00.110 GAL

F0001

b. **PERCHLORETHYLENE 1897 UN**

CHLORINATED SOLVENT 12ORME

001 DM

00055 GAL

F0001

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

TRI ETHANE 366

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name

JERRY MIRSHAK

Signature

Jerry Mirshak

Month Day Year
10 04 89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Johnnie Smith

Signature

Johnnie Smith

Month Day Year
10 04 89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Johnnie Smith

Signature

Johnnie Smith

Month Day Year
10 04 89

19. Discrepancy Indication Space

2.1 ATZ T63 12/6

20. Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name

W. H. T. K. S. A

Signature

W. H. T. K. S. A

Month Day Year
10 11 89

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

GENERATOR

TRANSPORTER

FACILITY

INA 0322604

0017042



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

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Form Approved. OMB No. 2050-0039. Expires 9-30-91

**UNIFORM HAZARDOUS
WASTE MANIFEST**

1. Generator's US EPA ID No.

1.L.D.O.05.08.6.25.1

Manifest
Document No.
000004

2. Page 1
of 1

Information in the shaded areas is
not required by Federal law, but
items D, F, H and I are required by
State law.

3. Generator's Name and Mailing Address

MILTON INDUSTRIES INC
4500 W. CORTLAND
CHICAGO, IL - 60645

A. State Manifest Document Number

INA 0322605

4. Generator's Phone

312 235-9400

B. State Generator's ID

5. Transporter 1 Company Name

ROSKIN MOTOR FREIGHT

6. Use EPA ID Number

1.L.D.O.4.5.6.9.5.7.1.5

C. State Transporter's ID

1400

D. Transporter's Phone

312-376-9343

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address

AMERICAN CHEMICAL SERVICE
GRIFFITH IND - 46319

10. Use EPA ID Number

1.A.D.O.1.6.3.6.0.2.6.5

G. State Facility's ID

9180890002

H. Facility's Phone

312-768-3400

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers

No.

Type

13. Total
Quantity

14. Unit
Wt/Vol.

15. Waste No.

a. TRICHLOROETHANE

ORM-A W2381 111TR.

002

DM

00.11

0 GAL

F0001

b. PERCHLOROETHYLENE 1897 UN

CHLORINATED SOLVENT 12ORME

00.1

DM

000.55

6 GAL

F0001

c.

d.

J. Additional Descriptions for Materials Listed Above

TRI ETHANE 366

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name

JERRY MIRSHAK

Signature

Jerry Mirshak

Date
Month Day Year
1 20 789

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

CLARENCE NEAL

Signature

Clarence Neal

Date
Month Day Year
1 20 789

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Date
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name

W. H. HALEK H

Signature

W. H. HALEK

Date
Month Day Year
1 20 789



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.	
3. Generator's Name and Mailing Address MILTON INDUSTRIES 4500 W. CORTLAND CHICAGO, IL - 60639		1. LD005.086.251		A. State Manifest Document Number INA 0322606		
4. Generator's Phone (312) 235-9400		6. Use EPA ID Number 1. LD.045695.715		B. State Generator's ID		
5. Transporter 1 Company Name ROSKIN MOTOR FREIGHT		7. Transporter 2 Company Name		C. State Transporter's ID 1400		
8. Use EPA ID Number		9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERV. GRIFFITH IND - 46319		D. Transporter's Phone 312-376-9343		
10. Use EPA ID Number 1. N.D.01.636.0.2.65		E. State Transporter's ID		F. Transporter's Phone 312-376-9343		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		G. State Facility's ID 9180890002		
a. TRICHLOROETHANE ORMA - W2381 111TR		No. Type		H. Facility's Phone 312-768-3400		
b. PERCHLORETHYLENE 1897 UN CHLORINATED SOLVENT 120RME		001 DM 00.055 GAL F0001				
c.		002 DM 00.110 GAL F0001				
d.						
J. Additional Descriptions for Materials Listed Above TRI ETHANE 366		K. Handling Codes for Wastes Listed Above				
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name		Signature		Month Day Year		
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature		Month Day Year		
Printed/Typed Name JERRY MIRSHAK		Signature		02 06 90		
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Month Day Year		
Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.						
Printed/Typed Name Harold F. Schmitt		Signature		Month Day Year 02 14 90		

In case of a spill call the Indiana Office of Environmental Response at 317/241-4336 (day or night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22
Previous editions are obsolete.
State Form 11865 (R/4-88)

COPY 5. TSD COPY

2B 1 PCTV63 260 1A-1BF T63 3/11/90
0017965

INA0322606



STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY DIVISION OF LAND POLLUTION CONTROL

2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706 (217) 782-6761

IL532-0610

LPC 62 8/81

Please print or type.

(Form designed for use on elite (12-pitch) typewriter.)

EPA Form 8700-22 (3-84)

Form Approved OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but is required by Illinois law.	
3. Generator's Name and Mailing Address		MILTON INDUSTRIES 4500 W. CORTLAND		Allinois Manifest Document Number IL 1320180		
4. Generator's Phone (312 235-9400)		CHICAGO, IL - 60639		Illinois Generator's ID 10316905972		
5. Transporter 1 Company Name		6. US EPA ID Number		C. Illinois Transporter's ID		
ROSKIN MOTOR FREIGHT		1LD045695715		D. (312) 261-7236 Transporter's Phone		
7. Transporter 2 Company Name		8. US EPA ID Number		E. Illinois Transporter's ID		
				F. () Transporter's Phone		
9. Designated Facility Name and Site Address		10. US EPA ID Number		G. Illinois Facility's ID		
AMERICAN CHEMICAL SERVICE				ID 91808900012		
GRIFFITH, IND. - 46319		1IND016360265		H. Facility's Phone (219) 924-4370		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity	14. Unit Wt/Vol	
a. <input type="checkbox"/> HM		No.	Type		Waste No.	
b. PERCHLORETHYLENE CHLORINATED SOLVENT 12ORM-E UN 1897		2	DM	11.01	EPA HW Number F1001	
c.					EPA HW Number Authorization Number	
d.					EPA HW Number Authorization Number	
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above				
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.						
Printed/Typed Name		Signature		Date		
JERRY MIRSHAK		Jerry Mirshak		Month Day Year 02 2 1986		
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature		Date		
Printed/Typed Name		Signature		Month Day Year		
CLARENCE NEAL		Clarence Neal		2 26 86		
18. Transporter 2 Acknowledgement or Receipt of Materials		Signature		Date		
Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name		Signature		Date		
STEVE KULAVICK		Steve Kulavick		Month Day Year 10 3 05 86		

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111 1/2, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed \$25,000 per day of violation. Falsification of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form has been approved by the Form Management Center.

FACILITY COPY - PART 3

1202014091



Please print or type.

(Form designed for use on elite (12-pitch) typewriter.)

EPA Form 8700-22 (3-84)

Form Approved OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. 1LD005086251	Manifest Document No. 0003	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but is required by Illinois law.		
3. Generator's Name and Mailing Address MILTON, IND. 4500 W. CORTLAND CHICAGO, IL - 60615				A. Illinois Manifest Document Number IL 1320183			
4. Generator's Phone (312-735-9400)				B. Illinois Generator's ID 9316903972			
5. Transporter 1 Company Name ROSKIN MOTOR FREIGHT				C. Illinois Transporter's ID 312-261-7230			
6. US EPA ID Number 1LD045695715				D. Transporter's Phone			
7. Transporter 2 Company Name				E. Illinois Transporter's ID			
8. US EPA ID Number				F. Transporter's Phone			
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE GRIFFITH, IND - 46319				G. Illinois Facility's ID 9184894002			
10. US EPA ID Number IND016360265				H. Facility's Phone (219) 924-4370			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers	13. Total Quantity	14. Unit	15. Waste No.
a. HM PERCHLOROETHYLENE CHLORINATED SOLVENT 120RM-E UN1897				No. 003	Type DM	165	1
b.							
c.							
d.							
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.							
Printed/Typed Name JERRY MURSHAK				Signature Jerry Murshak		Date 06/04/86	
17. Transporter 1 Acknowledgement of Receipt of Materials				Printed/Typed Name CLARENCE NEAL		Signature Clarence Neal	
18. Transporter 2 Acknowledgement or Receipt of Materials				Printed/Typed Name		Signature	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.				Printed/Typed Name F. DUNFEE		Signature F. Dunfee	
						Date 6/7/86	

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

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FACILITY COPY - PART 3

120819092



Please print or type.

(Form designed for use on elite (12-pitch) typewriter.)

EPA Form 8700-22 (3-84)

Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. 1LD005086251	Manifest Document No. 0005	2. Page 1 1 of 1	Information in the shaded areas is not required by Federal law, but is required by Illinois law.	
3. Generator's Name and Mailing Address MILTON IND - 4500 IN-CORTLAND CHICAGO, IL-60639		6. US EPA ID Number 1LD045695715		A. Illinois Manifest Document Number 1320185		
4. Generator's Phone (312) 235-9400		7. Transporter 1 Company Name ROSKIN MOTOR FREIGHT		B. Illinois Generator's ID 10316005972		
5. Transporter 1 Company Name ROSKIN MOTOR FREIGHT		8. US EPA ID Number		C. Illinois Transporter's ID 11400		
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE GRIFFITH, IND - 46319		10. US EPA ID Number IND016360265		D. (312) 261-7236 Transporter's Phone		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type		13. Total Quantity		
a. PERCHLOROETHYLENE CHLORINATED SOLVENT 120RM-E UN1897		003 DM001101		14. Unit Wt/Vol		
b.				15. EPA HW Number F007A		
c.				16. EPA HW Number F007A		
d.				17. EPA HW Number F007A		
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above				
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and Illinois regulations.						
Printed/Typed Name JERRY MIRSHAK		Signature Jerry Mirshak		Date 0822180		
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature H. ROSKIN		Date		
18. Transporter 2 Acknowledgement or Receipt of Materials		Signature		Date		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name G MURPHY		Signature G Murphy		Date 08125180		

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 FACILITY PART - 4 TRANSPORTER PART - 5 IEPA PART - 6 GENERATOR

REV. # 5

This Agency is authorized to require, pursuant to Illinois Revised Statutes, 1983, Chapter 111, Section 21, that this information be submitted to the Agency. Failure to provide the information may result in a civil penalty against the owner or operator of not to exceed \$25,000 per day of violation. Fabrication of this information may result in a fine up to \$50,000 per day of violation and imprisonment up to 5 years. This form is subject to the provisions of the Illinois Hazardous Waste Management Center.

FACILITY COPY - PART 3

0160978

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law
3. Generator's Name MILTON INDUSTRIES 4500 W. CORTLAND CINCINNATI, OH 45223		1 LD0005DB1625110120157		A. State Manifest Document Number IN 089218	
4. Generator's Phone 513 235 7420		5. US EPA ID Number 112120145619157115		B. State Generator's ID 0316055972	
5. Transporter 1 Company Name 1125K10		6. US EPA ID Number		C. State Transporter's ID 1400	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 21217236	
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE GRIFFITH IND 46319		10. US EPA ID Number 112120145619157115		E. State Transporter's ID	
				F. Transporter's Phone	
				G. State Facility's ID 9180890002	
				H. Facility's Phone 768-3400	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity	14. Unit Wt/Vol
		No.	Type		Waste No.
a. PERCHLOR O R M-A UN 1847		12	DM	11/12	1 F051
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.					
Printed/Typed Name JERRY MURSHAK		Signature [Signature]		Month Day Year 11/13/76	
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name RAY J. AK		Signature [Signature]	
		Signature [Signature]		Month Day Year 11/13/76	
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature	
		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.					
Printed/Typed Name Harold F. Schmidt		Signature [Signature]		Month Day Year 11/13/76	

EPA Form 8700-22A (Rev. 11-85)

T.S.D. DETACH AND RETAIN THIS COPY

IN 089218

0190963 3

HAZARDOUS WASTE MANIFEST

THIS SHIPPING ORDER

must be legibly filled in, in ink, in Indelible Pencil, or in Carbon, and retained by the Agent.

MANIFEST DOCUMENT NUMBER

016

TO: T/S/D FACILITY <u>América-Chicago</u>	FROM: Generator <u>MILITARY H+G5-Republic</u>
E.P.A. ID Code No. <u>010 016 250 265</u>	E.P.A. ID Code No. <u>IND 005 06 7608</u>
Address <u>4333 S. Ohio St. Chicago, IL 60640</u>	Address <u>4333 S. Ohio St. Chicago, IL 60640</u>
Destination <u>CD 2501 D.D. 41319</u>	Origin <u>SAINT ROGER</u>
Phone <u>312 974-4776</u>	Phone <u>312 872 0006</u>

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
2	Compound paint Thinning liquid	Flammable liquid	NA 1442	F003 F005	110940 800	Flammable liquid 114210 DANG CORROS

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without receipt on the carrier, the carrier shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other financial charges.

FREIGHT CHARGES
PREPAID ☒ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

EMERGENCY RESPONSE INFORMATION

T/S/D FACILITY <u>América-Chicago</u>	CONTACT Name _____
E.P.A. ID Code No. <u>010 016 250 265</u>	Phone _____
Address <u>4333 S. Ohio St. Chicago, IL 60640</u>	National Response Center 1-800-424-8802
Destination <u>CD 2501 D.D. 41319</u>	in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature [Signature] Date 4/1/85

TRANSPORTER #1 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

Transporter No. 1 Signature [Signature] Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY Signature _____ Date _____

TRANSPORTER #2 COPY

204K ✓
T-50

009604



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch) typewriter.)

Form Approved, OMB No. 2050-0039, Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

WI-000436983104707

Manifest Document No.

2. Page 1

Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address

Milwaukee Faucets
4250 N. 124th St. - Milwaukee, Wisconsin

A. State Manifest Document Number

INA 0248907

4. Generator's Phone ()

(414) 461-8700

B. State Generator's ID

WI-000436983104707

5. Transporter 1 Company Name

CBC Transport

C. State Transporter's ID

WI-000436983104707

6. Use EPA ID Number

WI-000436983104707

7. Transporter 2 Company Name

ENDO 16360265

D. Transporter's Phone ()

(219) 924-4370

8. Use EPA ID Number

WI-000436983104707

9. Designated Facility Name and Site Address

AMERICAN CHEMICAL SERVICES, INC.
420 S. COLfax
Coriffith IN 46319

E. State Transporter's ID

WI-000436983104707

10. Use EPA ID Number

WI-000436983104707

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

WASTE FLAMMABLE LIQUID, NOS. UN1993

F. State Facility's ID

WI-000436983104707

12. Containers

20.2 DM 00110

G. State Facility's Phone ()

(219) 924-4370

13. Total Quantity

20.2 DM 00110

H. Facility's Phone ()

(219) 924-4370

14. Unit

20.2 DM 00110

I. Waste No.

001

15. Special Handling Instructions and Additional Information

WASTE FLAMMABLE LIQUID, NOS. UN1993

J. Additional Descriptions for Materials Listed Above

WASTE FLAMMABLE LIQUID, NOS. UN1993

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

WASTE FLAMMABLE LIQUID, NOS. UN1993

K. Handling Codes for Wastes Listed Above

WASTE FLAMMABLE LIQUID, NOS. UN1993

17. Transporter 1 Acknowledgement of Receipt of Materials

WASTE FLAMMABLE LIQUID, NOS. UN1993

L. Facility's Phone ()

(219) 924-4370

18. Transporter 2 Acknowledgement of Receipt of Materials

WASTE FLAMMABLE LIQUID, NOS. UN1993

M. Facility's Phone ()

(219) 924-4370

19. Discrepancy Indication Space

WASTE FLAMMABLE LIQUID, NOS. UN1993

N. Facility's Phone ()

(219) 924-4370

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

WASTE FLAMMABLE LIQUID, NOS. UN1993

O. Facility's Phone ()

(219) 924-4370

Printed/Typed Name

ALAN S. VITSE

P. Facility's Phone ()

(219) 924-4370

Signature

ALAN S. VITSE

Month

07

Date

07/08/88

Day

08

Year

1988

Month

07

Date

07/08/88

Day

08

Year

1988

Month

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Year

1988

Month

07

INA 0248907



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

W-100007803796457

Manifest Document No.

2. Page 1

of 1

Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address

MILWAUKEE METROPOLITAN SEWAGE DISTRICT
735 N. WATER ST. - MILWAUKEE, WI

4. Generator's Phone

(414) 442-2040

6. Use EPA ID Number

W-10047259288

5. Transporter 1 Company Name

CBC Transport

7. Transporter 2 Company Name

8. Use EPA ID Number

9. Designated Facility Name and Site Address

AMERICAN CHEMICAL SERVICE'S
H205 COLMAN - PO BOX 190
CORYVILLE, IN 46319

10. Use EPA ID Number

IND016360265

A. State Manifest Document Number

INA 0126457

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone

(414) 767-7005

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

(219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

a. RD, WASTE FLAMMABLE LIQUID, N.D.S., (FLAMMABLE LIQUID), UN1993, (FOOS)

12. Containers

No. Type

602 DMD0110

13. Total Quantity

14. Unit Wt/Vol.

15. Waste No.

DOO1/FOOS

J. Additional Descriptions for Materials Listed Above

4. WASTE THINNER & PAINT

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: Judith A. Grzesinski, Safety Mgr. Signature: Judith A. Grzesinski Month: 09 Day: 16 Year: 87

17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name: Bruce Benoit - ENVIR FIELD TECH Signature: Bruce Benoit Month: 09 Day: 16 Year: 87

18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name: Signature: Month: Day: Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name: HAROLD F. Schmitt Signature: Harold F. Schmitt Month: 09 Day: 16 Year: 87

EPA Form 8700-22 (Rev. 9-86)

Previous editions are obsolete.

State Form 11865

DISTRIBUTION:

PAGE 1 (white) TSD MAIL TO GENERATOR

PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE

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PAGE 5 (light blue) TSD COPY

PAGE 6 (canary) GENERATOR COPY

PAGE 7 (white) TRANSPORTER 1 COPY

PAGE 8 (white) TRANSPORTER 2 COPY

012846

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

WTD 071154611

Manifest Document No.

00003

2. Page 1

of 1

Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address

MILWAUKEE SIGN,
1964 WISCONSIN, GRAFTON, WI 53024

4. Generator's Phone (414) 377-8920

5. Transporter 1 Company Name

CBC TRANSPORT

6. Use EPA ID Number

W-I-D-0-4-7-2-5-9-2-8-8

7. Transporter 2 Company Name

8. Use EPA ID Number

9. Designated Facility Name and Site Address

American Chemical service
420 S. COLFAX AVE.
BRIFFITH, INDIANA 46319

10. Use EPA ID Number

I-W-D-0-1-6-3-6-0-2-6-5

A. State Manifest Document Number

INA 0126407

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

WASTE FLAMMABLE LIQUID, N.O.S
FLAMMABLE LIQUID UN 1993

12. Containers

No. Type

13. Total Quantity

14. Unit Wt./Vol.

15. Waste No.

0050A002756

0001

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable International and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

JOHN JOHNSON

Signature

John Johnson

Date

6/10/87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

BOB BERNAL

Signature

Bob Bernal

Date

6/10/87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

BOB BERNAL

Signature

Bob Bernal

Date

6/10/87

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.

Printed/Typed Name

MARCO F. SCHNEIDER

Signature

Marco F. Schneider

Date

6/10/87

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
State Form 11865

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PAGE 6 (canary) GENERATOR COPY
PAGE 7 (white) TRANSPORTER 1 COPY
PAGE 8 (white) TRANSPORTER 2 COPY

012844



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

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Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

WID07115461100004

Manifest Document No.

2. Page 1 of 1

Information in the shaded areas is not required by Federal law, but items D, F, H and I are required by State law.

3. Generator's Name and Mailing Address

MILWAUKEE SIGN CO.
1964 WISCONSIN AVE - GRAFTON, WI

A. State Manifest Document Number

INA 0126458

4. Generator's Phone

(414) 377-8930

6. Use EPA ID Number

WID047259253

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone

E. State Transporter's ID

F. Transporter's Phone

5. Transporter 1 Company Name

CBC Transport

7. Transporter 2 Company Name

9. Designated Facility Name and Site Address

AMERICAN CHEMICAL SERVICE'S
420 S. COLFAX AVE - PO BOX 190
CERIFFITH, IN 46319

10. Use EPA ID Number

IN-D016360265

G. State Facility's ID

H. Facility's Phone

(219) 924-4370

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

WASTE FLAMMABLE LIQUID, N.O.S.

(FLAMMABLE LIQUID)

UN1993

0.1 M 00605 G

DOO1

12. Containers

No. Type

13. Total Quantity

14. Unit Wt/Vol.

15. Waste No.

J. Additional Descriptions for Materials Listed Above

Q - WASTE THINNER & INK

K. Handling Codes for Wastes Listed Above

IF FOLLOWING INFORMATION IN THE SHADDED AREAS IS REQUIRED BY FEDERAL LAW, ENTER THE PROPER NUMBER OF FIRST THROUGH FOURTH HANDLING CODES IN THE SPACES PROVIDED.

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

STUART C. ALLEN

Signature

[Signature]

Month Day Year

6/1/89

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

BRUCE BENNETT - ENVIR FEED TECH

Signature

[Signature]

Month Day Year

10/1/89

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name

Harold F. Schmidt

Signature

[Signature]

Month Day Year

6/9/89

EPA Form 8700-22 (Rev. 9-86)

Previous editions are obsolete.

State Form 11865

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PAGE 5 (light blue) TSD COPY

PAGE 6 (canary) GENERATOR COPY

PAGE 7 (white) TRANSPORTER 1 COPY

PAGE 8 (white) TRANSPORTER 2 COPY

012845

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law
3. Generator's Name MILWAUKEE SIGN CO. 1904 WISCONSIN AVE. GRAFTON, WI.		WID071154161100008		A. State Manifest Document Number IN 049974	
4. Generator's Phone (414) 377-8920 53024		5. Transporter 1 Company Name CBC AQUASEARCH		B. State Generator's ID	
6. US EPA ID Number WID0417259121818		7. Transporter 2 Company Name		C. State Transporter's ID IN 9921-0000-11	
8. US EPA ID Number		9. Designated Facility Name and Site Address AMERICAN CHEMICAL 430 S. COLFAX AVE - P.O. BOX 190 GRIFFITH, IN 46319		D. Transporter's Phone (414) 764-7005	
10. US EPA ID Number		IND016360365		E. State Transporter's ID	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		F. Transporter's Phone	
a. WASTE FLAMMABLE LIQUID, N.O.S. (FLAMMABLE LIQUID) UN1993 080 DM		No. Type		G. State Facility's ID	
b.		13. Total Quantity		H. Facility's Phone	
c.		14. Unit Wt/Vol		I. Waste No.	
d.		15. Special Handling Instructions and Additional Information			
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
a. THINNER & INK					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.		Printed/Typed Name JAMES R HOGAN		Signature James R. Hogan	
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name BRUCE BENOIT		Signature Bruce Benoit	
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.		Printed/Typed Name HARRISON F. Schmitt		Signature Harrison F. Schmitt	

EPA Form 8700-22A (Rev. 11-85)

T.S.D. DETACH AND RETAIN THIS COPY

MAIL 20-204R-T50 15

012843

IN 049974



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but items D, F, H, and I are required by State law.
3. Generator's Name and Mailing Address MILWAUKEE SIGN CO. 1964 WISCONSIN - GRAFTON, WISCONSIN		IND 071134611	035887	INA 0233687	
4. Generator's Phone 414 377-8920		53024			
5. Transporter 1 Company Name CBC TRANSPORT		Use EPA ID Number IND 000000000	C. State Transporter's ID 11530	D. Transporter's Phone (414) 255-5500	
7. Transporter 2 Company Name ABC TRANSPORT		Use EPA ID Number IND 000000000	E. State Transporter's ID 11530	F. Transporter's Phone (414) 255-5500	
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE'S 420 SOUTH COLFAX GRIFFITH, IN 46319		10. Use EPA ID Number IND 016350265	G. State Facility's ID 11530	H. Facility's Phone (219) 924-4370	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number) PO, WASTE FLAMMABLE LIQUID - N.O.S. - FLAMMABLE LIQUID - UN1993 - (P003, P005)		12. Containers No. Type 024 DN 01320	13. Total Quantity Unit 0.1320	14. Waste No. 0.0000	
J. Additional Descriptions for Materials Listed Above 11a. - THINNER / INK		K. Handling Codes for Wastes Listed Above 11a. - THINNER / INK			
15. Special Handling Instructions and Additional Information L-44 T63					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name BILL THASKE		Signature <i>Bill Thaske</i>		Month 05	Date Day 04 Year 88
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name BRUCE BENOIL		Signature <i>Bruce Benoil</i>		Month 05	Date Day 07 Year 88
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month	Date Day Year
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19. Printed/Typed Name HAROLD F. SCHMIDT					
Signature <i>Harold F. Schmidt</i>		Month 15		Date Day 10 Year 88	

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

EPA Form 8700-22 (Rev. 9-86)
Previous editions are obsolete.
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PAGE 5 (light blue) TSD COPY

PAGE 6 (canary) GENERATOR COPY

PAGE 7 (white) TRANSPORTER 1 COPY

PAGE 8 (white) TRANSPORTER 2 COPY

21-126 TCT 63 5/11/88
2-204 R TSD 5/11/88

1 MARINE SHALE 10/1/88 804083


0015330

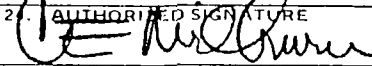
INA 0233687


A 14401

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION													
1. COMPANY NAME Milwaukee Solvents & Chemicals			2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS								
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue													
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051			6. TELEPHONE NUMBER (414) 252-3550										
7. NUMBER & TYPE OF CONTAINER 1 Tanker	8. GALLONS 5000	9. WASTE NAME Waste Solvent N.O.S.			10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA 1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid		13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 38,000			
							1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid						
							1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid						
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.					15. AUTHORIZED SIGNATURE 			16. NAME (Print) Thomas A. Winters			17. DATE SHIPPED M / D / Y 11/24/80		

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE 		25. NAME (Print) C.E. MILBURN	
		26. Date Accepted 11/24/80	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	
		31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND0016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 221-1370	
37. COMMENTS Unloaded in west 11-24			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE 		39. NAME (Print)	
		40. Date Accepted 11/24/80	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)


FOR DNR USE ONLY

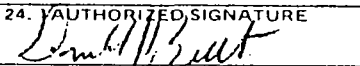
HAZARDOUS WASTE FACILITY

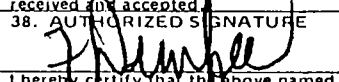
A 14402

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION			
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIB023350192	
3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue			
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS
(1) Tanker	4500.0	Waste Solvent N.O.S.	Flammable Liquid
			11. US DOT IDENTIFICATION NUMBER NA1993
			12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid
			13. US EPA WASTE CODE F003
			14. SHIPPING WEIGHT (Pounds) 38,000
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.			
15. AUTHORIZED SIGNATURE 		16. NAME (Print) Thomas A. Winters	
		17. DATE SHIPPED M / D / Y 12 / 5 / 80	

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE 	25. NAME (Print) DONALD H. BUHL	26. Date Accepted 12 / 5 / 80	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS East & West 977M 12/5/80 T-50			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE 	39. NAME (Print) F. D. N. F.	40. Date Accepted 12 / 5 / 80	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

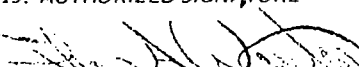
FOR DNR USE ONLY

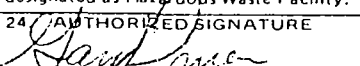
HAZARDOUS WASTE FACILITY

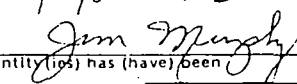
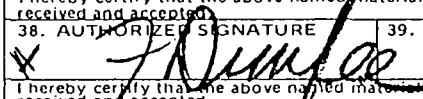
A 14409

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION									
1. COMPANY NAME Milwaukee Solvents & Chemicals			2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue									
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051			6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 5600	9. WASTE NAME Waste Solvent N.O.S.			10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. USE EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds)
							1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
							1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.					15. AUTHORIZED SIGNATURE 		16. NAME (Print) Thomas A. Winters		17. DATE SHIPPED M D Y 1/12/81

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank Inc.		19. EPA IDENTIFICATION NO. ILD069506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE 	25. NAME (Print) GARY DRUEN	26. Date Accepted 1/12/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS Pumped to WEST AGIT R 1/12/81 T-50 		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE 	39. NAME (Print) Jim Murphy	
40. Date Accepted 1/12/81		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY


HAZARDOUS WASTE FACILITY

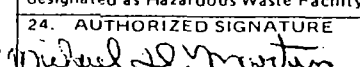
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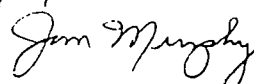
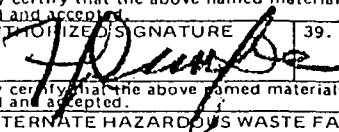
A 14410

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION			
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192	
3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue			
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS
(1) Tanker	5000	Waste Solvent N.O.S.	Flammable Liquid
			11. US DOT IDENTIFICATION NUMBER NA1993
			12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>
			13. US EPA WASTE CODE F003
			14. SHIPPING WEIGHT (Pounds) 37.000
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.			
15. AUTHORIZED SIGNATURE 		16. NAME (Print) Thomas A. Winters	
		17. DATE SHIPPED M / D / Y 1/27/81	

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE 	25. NAME (Print) MICHAEL DINK	26. Date Accepted M / D / Y 1/27/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	
		31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS TO EAST AGIT R - 1/27/81 T-50 			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE 	39. NAME (Print) JIM MURPHY	40. Date Accepted M / D / Y 1/27/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

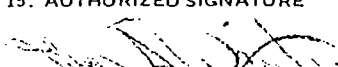
HAZARDOUS WASTE FACILITY

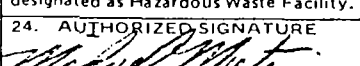
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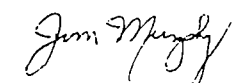
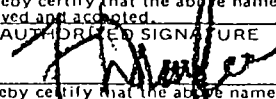
A 14411

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	4800	Waste Solvent N.O.S.		Flammable Liquid	NA1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	F003	35,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE 		16. NAME (Print) Thomas A. Winters		17. DATE SHIPPED 2/9/81

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank Inc.		19. EPA IDENTIFICATION NO. ILD069506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE 	25. NAME (Print) MICHAEL MARTIN	26. Date Accepted 2/9/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS TO WEST AGITER 2/9/81 T-50 		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE 	39. NAME (Print) FRANK	40. Date Accepted 2/9/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY


000894

A 14412

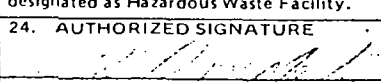
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Please type or print clearly using ball point pen — press hard.

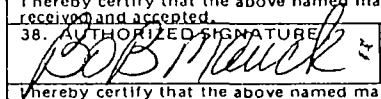
GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WI0002350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	5000	Waste Solvent N.O.S.		Flammable Liquid	NA1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	F003	36000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE 		16. NAME (Print) Thomas A. Winters		17. DATE SHIPPED M D Y 3/9/81

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE 		25. NAME (Print) Bob Mauck	
		26. Date Accepted M D Y 3/9/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	
		31. Date Accepted M D Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffity, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS TO 203R T-50 3/9/81 Jim Murphy			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE 		39. NAME (Print) Bob Mauck	
		40. Date Accepted M D Y 3/9/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M D Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

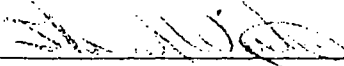
HAZARDOUS WASTE FACILITY


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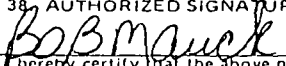
A 14413

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414)-252-3550						
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	5000	Waste Solvent N.O.S.		Flammable Liquid	NA1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	F003	3200
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE 		16. NAME (Print) Thomas A. Winters		17. DATE SHIPPED M / D / Y 3/12/81

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312)-596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE 	25. NAME (Print) BOB MAUCK	26. Date Accepted M / D / Y 3/12/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219)-924-4370	
37. COMMENTS TO WEST ACITE 3/12/81 T-50 			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE 	39. NAME (Print) BOB MAUCK	40. Date Accepted M / D / Y 3/12/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000896

See reverse side, Copy 6, for instructions.

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HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

9-80

MANIFEST NUMBER

A 14415

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME		2. EPA IDENTIFICATION NO.		3. COMMENTS/SPECIAL INSTRUCTIONS				
Milwaukee Solvents & Chemicals		WID023350192						
4. P.O. BOX OR STREET ADDRESS								
14765 Bobolink Avenue								
5. CITY, STATE, ZIP CODE			6. TELEPHONE NUMBER					
Menomonee Falls, WI 53051			(414) 252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker		Waste Solvent N.O.S.		Flammable Liquid	NA1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	F003	
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE		16. NAME (Print)		17. DATE SHIPPED
						Thomas A. Winters		3/26/81

TRANSPORTER SECTION			
18. COMPANY NAME		19. EPA IDENTIFICATION NO.	
Mr. Frank, Inc.		ILD069506160	
20. P.O. BOX OR STREET ADDRESS			
201 West 155th Street			
21. CITY, STATE, ZIP CODE		22. TELEPHONE NUMBER	
South Holland, Illinois 60473		(312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted	
	Michael D. Martin	3/26/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted	
		M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME		33. EPA IDENTIFICATION NO.	
American Chemical		IND016360265	
34. P.O. BOX OR STREET ADDRESS			
420 South Colfax Road			
35. CITY, STATE, ZIP CODE		36. TELEPHONE NUMBER	
Griffith, Indiana		(219) 924-4370	
37. COMMENTS			
TO 203R 3/26/81 T-50 Jim Murphy			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted	
	F. DUNFEE	3/26/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted	
		M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

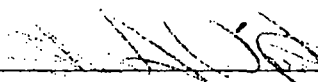
HAZARDOUS WASTE FACILITY

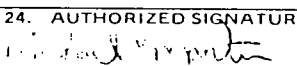
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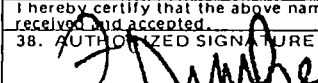
A 14416

See reverse side/Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION					
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS	
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue					
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051			6. TELEPHONE NUMBER (414)-252-3550		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)
(1) Tanker	3800	Waste Solvent N.O.S.	Flammable Liquid	NA1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.			15. AUTHORIZED SIGNATURE 		16. NAME (Print) Thomas A. Winters
					17. DATE SHIPPED M D Y 4/9/81

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473 -		22. TELEPHONE NUMBER (312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE 	25. NAME (Print) Mr. Frank, Inc.	26. Date Accepted 4/9/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS TO WEST ACIT R 4/9/81 T-50 gpm			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE 	39. NAME (Print) FDU NTEE	40. Date Accepted 4/9/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

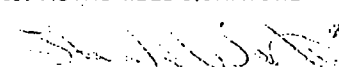
HAZARDOUS WASTE FACILITY

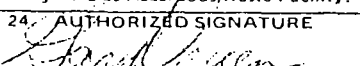
000900

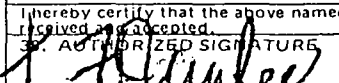
A 14417

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION				1. COMMENTS/SPECIAL INSTRUCTIONS			
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192					
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 5000	9. WASTE NAME Waste Solvent N.O.S.	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. USE EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 45000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE 		16. NAME (Print) Thomas A. Winters	
				17. DATE SHIPPED M / D / Y 5/27/81			

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE 	25. NAME (Print) GARY D. DEAN	26. Date Accepted M / D / Y 5/27/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS TO WEST ACIT T-50 5/27/81 gmm			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE 	39. NAME (Print) EDUNFEE	40. Date Accepted M / D / Y 5/27/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

668009

A 14418

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION									
1. COMPANY NAME Milwaukee Solvents & Chemicals			2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue									
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051			6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 5000	9. WASTE NAME Waste Solvent N.O.S.			10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds)
							1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
							1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.					15. AUTHORIZED SIGNATURE <i>Terry J Dietrich</i>		16. NAME (Print) Terry Dietrich		17. DATE SHIPPED M D Y 6/9/81

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD0069506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>Michael Martin</i>	25. NAME (Print) MR. MICHAEL MARTIN	26. Date Accepted 6/9/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS TO EAST ACIT. T-50 6/9/81 JFM.			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>FDUNFEZ</i>	39. NAME (Print) FDUNFEZ	40. Date Accepted 6/9/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE <i>JP</i>	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000901

A 29901

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION							
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER 414 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 5000	9. WASTE NAME Waste Solvent N.O.S.		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid	
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid	
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Terry J Dietrich</i>		16. NAME (Print) Terry Dietrich	
						17. DATE SHIPPED M / D / Y 6 / 23 / 81	

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>Michael J. Martin</i>	25. NAME (Print) MICHAEL MARTIN	26. Date Accepted 6/23/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS 10 203 4/23/81 T-50 g/m		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>Franklin</i>	39. NAME (Print) FRANKLIN	40. Date Accepted 6/23/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE		44. NAME (Print)
		45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

206002

A 29902

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent N.O.S.		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid	
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid	
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Terry Dietrich</i>		16. NAME (Print) Terry Dietrich	
						17. DATE SHIPPED M / D / Y 7/7/81	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Robert Perkins</i>	25. NAME (Print) Robert Perkins	26. Date Accepted M / D / Y 7/7/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS TO WEST AGIT T-50 gpm 7/7/81			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Robert Perkins</i>	39. NAME (Print) Robert Perkins	40. Date Accepted M / D / Y 7/7/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000903

A 29908

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION									
1. COMPANY NAME Milwaukee Solvents & Chemicals			2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue									
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051			6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 5000	9. WASTE NAME Waste Solvent N.O.S.			10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 5000
							1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
							1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.					15. AUTHORIZED SIGNATURE <i>Terry J Dietrich</i>		16. NAME (Print) Terry Dietrich		17. DATE SHIPPED M / D / Y 1/2/81

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>Frank</i>	25. NAME (Print) GARY DREW	26. Date Accepted M / D / Y 1/2/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS TO 210 X T-50 1/2/81 JRM		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>Frank</i>	39. NAME (Print) FRANK	40. Date Accepted M / D / Y 1/2/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000904

A 29909

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION			
1. COMPANY NAME M/I Inc Solvents + Chemicals		2. EPA IDENTIFICATION NO. WIS00235042	
3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 11745 West Bokunick Ave.			
5. CITY, STATE, ZIP CODE Palm Beach Falls WI 53051		6. TELEPHONE NUMBER (414) 462-3550	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS
1 Tanker	5000	Waste Solvent NOS.	Flammable liquid
11. US DOT IDENTIFICATION NUMBER NA 163		12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE
		1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	1003
		1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid	
		1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid	
14. SHIPPING WEIGHT (Pounds)		15. AUTHORIZED SIGNATURE Terry J. Duane	
35,000		16. NAME (Print) Terry J. Duane	
		17. DATE SHIPPED 8/21/81	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

TRANSPORTER SECTION		
18. COMPANY NAME M/I Truck Trc		19. EPA IDENTIFICATION NO. WI000450610
20. P.O. BOX OR STREET ADDRESS 151 West 185th St.		
21. CITY, STATE, ZIP CODE South 10/11/81		22. TELEPHONE NUMBER (608) 604773
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE Terry J. Duane	25. NAME (Print) TERRY J. DUANE	26. Date Accepted 8/21/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE		30. NAME (Print)
		31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. WI000450610
34. P.O. BOX OR STREET ADDRESS 420 South Coffee Road		
35. CITY, STATE, ZIP CODE Gallatin WI 53001		36. TELEPHONE NUMBER (414) 462-4376
37. COMMENTS To 204R 7-50 8/21/81 gmm		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE Terry J. Duane	39. NAME (Print) TERRY J. DUANE	40. Date Accepted 8/21/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE		44. NAME (Print)
		45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000907

A 29910

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION							
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker		8. GALLONS 5000					
9. WASTE NAME Waste Solvent N.O.S.		10. US DOT HAZARD CLASS Flammable Liquid		11. US DOT IDENTIFICATION NUMBER NA1993		12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	
						13. US EPA WASTE CODE F003	
						14. SHIPPING WEIGHT (Pounds) 38,000	
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Terry Dietrich</i>		16. NAME (Print) Terry Dietrich	
						17. DATE SHIPPED M / D / Y 8/24/81	

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>GARY DUEA</i>	25. NAME (Print) GARY DUEA	26. Date Accepted 8/24/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road.		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS TO 210 X T-50 8/24/81 gpm.		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>FDUNE</i>	39. NAME (Print) FDUNE	40. Date Accepted 8/24/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000906

A 29912

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION			
1. COMPANY NAME Milwaukee Solvent Clean		2. EPA IDENTIFICATION NO. WI 0003450192	
3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. 1st Rd. Milwaukee Ave			
5. CITY, STATE, ZIP CODE Milwaukee WI 53051		6. TELEPHONE NUMBER 414 252-3850	
7. NUMBER & TYPE OF CONTAINER 1 Drum	8. GALLONS 5000	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS 1.2
11. US DOT IDENTIFICATION NUMBER NA11913		12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003
14. SHIPPING WEIGHT (Pounds)		15. AUTHORIZED SIGNATURE Tony J. Dietrich	
16. NAME (Print) Tony J. Dietrich		17. DATE SHIPPED M / D / Y 8/27/81	

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Perkins Inc.		19. EPA IDENTIFICATION NO. WI 0003450160	
20. P.O. BOX OR STREET ADDRESS 14765 W. 1st Rd. Milwaukee Ave			
21. CITY, STATE, ZIP CODE Milwaukee WI 53051		22. TELEPHONE NUMBER (414) 252-3850	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE Robert Perkins	25. NAME (Print) Robert Perkins	26. Date Accepted 8/28/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	
31. Date Accepted M / D / Y		32. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME Hazardous Waste Facility		33. EPA IDENTIFICATION NO. WI 0003450160	
34. P.O. BOX OR STREET ADDRESS 14765 W. 1st Rd. Milwaukee Ave			
35. CITY, STATE, ZIP CODE Milwaukee WI 53051		36. TELEPHONE NUMBER (414) 252-3850	
37. COMMENTS TO WEST 21R 8/27/81 JTM.			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE J. J. Dietrich	39. NAME (Print) J. J. Dietrich	40. Date Accepted 8/28/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
45. Date Accepted M / D / Y		46. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-474-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000905

A 29913

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER 414 1-252-3550						
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	5000	Waste Solvent N.O.S.		Flammable Liquid	NA1993	1. Solid 3. Mixture 2. Liquid <input checked="" type="checkbox"/>	F003	37,000
						1. Solid 3. Mixture 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture 2. Liquid <input type="checkbox"/>		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Terry Dietrich</i>		16. NAME (Print) Terry Dietrich		17. DATE SHIPPED M D Y 8/31/81

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) GARY DRUM	26. Date Accepted M D Y 8/31/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M D Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS To 211 R T-50 8/31/81 grom			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) DUNFEE	40. Date Accepted M D Y 8/31/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M D Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000908

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER

A 29914

GENERATOR (SHIPPER) SECTION															
1. COMPANY NAME MILWAUKEE SOLVENTS & CHEMICALS				2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS									
4. P.O. BOX OR STREET ADDRESS 14765 WEST BOBOLINK AVENUE															
5. CITY, STATE, ZIP CODE MENOMONEE FALLS, WI 53051				6. TELEPHONE NUMBER (414) 252-3550											
7. NUMBER & TYPE OF CONTAINER		8. GALLONS		9. WASTE NAME		10. US DOT HAZARD CLASS		11. US DOT IDENTIFICATION NUMBER		12. PHYSICAL STATE (Enter number in box)		13. US EPA WASTE CODE		14. SHIPPING WEIGHT (Pounds)	
(1) TANKER		5000		WASTE SOLVENT N.O.S.		FLAMMABLE LIQUID		NA1993		1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid		F003		3500	
										1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid					
										1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid					
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.										15. AUTHORIZED SIGNATURE <i>Terry J Dietrich</i>		16. NAME (Print) TERRY DIETRICH		17. DATE SHIPPED M / D / Y 9/13/81	

TRANSPORTER SECTION			
18. COMPANY NAME MR. FRANK, INC.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 WEST 155TH STREET			
21. CITY, STATE, ZIP CODE SOUTH HOLLAND, ILLINOIS 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>		25. NAME (Print) GARY DIER	
		26. Date Accepted M / D / Y 9/13/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	
		31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME AMERICAN CHEMICAL		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 SOUTH GOLFAX ROAD			
35. CITY, STATE, ZIP CODE GRIFFITH, INDIANA		36. TELEPHONE NUMBER (219) 924-3370	
37. COMMENTS TO 211R T-50 9/3/81 gjm			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>		39. NAME (Print) EDUNKEE	
		40. Date Accepted M / D / Y 9/3/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000909

A 29917

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION							
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER 414 1-252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	5000	Waste Solvent N.O.S.	Flammable Liquid	NA1993	1. Solid 2. Liquid 3. Mixture <input checked="" type="checkbox"/>	F003	3500
					1. Solid 2. Liquid 3. Mixture <input type="checkbox"/>		
					1. Solid 2. Liquid 3. Mixture <input type="checkbox"/>		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Terry J. Dietrich</i>		16. NAME (Print) Terry J Dietrich	17. DATE SHIPPED M / D / Y 11/9/81

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>C. Milborn</i>	25. NAME (Print) C MILBORN	26. Date Accepted M / D / Y 11/9/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS TO 21/E T-50 9/9/81 gsm		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>Edon Fee</i>	39. NAME (Print) EDON FEE	40. Date Accepted M / D / Y 11/9/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000910

A 29918

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION					
1. COMPANY NAME		2. EPA IDENTIFICATION NO.		3. COMMENTS/SPECIAL INSTRUCTIONS	
Milwaukee Solvents & Chemicals		WID023350192			
4. P.O. BOX OR STREET ADDRESS					
14765 West Bobolink Avenue					
5. CITY, STATE, ZIP CODE		6. TELEPHONE NUMBER			
Menomonee Falls, WI 53051		(414) 252-3550			
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)
(1) Tanker	5000	Waste Solvent N.O.S.	Flammable Liquid	NA1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.			15. AUTHORIZED SIGNATURE		16. NAME (Print)
			Terry J. Dietrich		Terry Dietrich
					17. DATE SHIPPED M / D / Y / /

TRANSPORTER SECTION		
18. COMPANY NAME		19. EPA IDENTIFICATION NO.
Mr. Frank, Inc.		ILL069506160
20. P.O. BOX OR STREET ADDRESS		
201 West 155th Street		
21. CITY, STATE, ZIP CODE		22. TELEPHONE NUMBER
South Holland, Illinois 60473		(312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted
<i>[Signature]</i>	CE MILBUERN	9/15/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME		33. EPA IDENTIFICATION NO.
American Chemical		IND016360265
34. P.O. BOX OR STREET ADDRESS		
420 South Colfax Road		
35. CITY, STATE, ZIP CODE		36. TELEPHONE NUMBER
Griffith, Indiana		(219) 924-4370
37. COMMENTS		
TO 211K T-50 9/15/81 JRM		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted
<i>[Signature]</i>	F. DUNFEE	9/15/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

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HAZARDOUS WASTE FACILITY

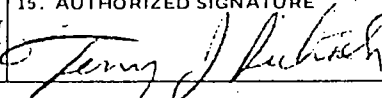
000911

A 29919

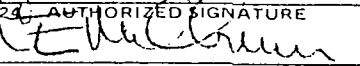
See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

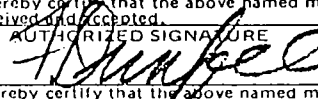
GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER 414 1-252-3550						
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. USE EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	5000	Waste Solvent N.O.S.		Flammable Liquid	NA1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	F003	25000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE 		16. NAME (Print) Terry Dietrich		17. DATE SHIPPED M D Y 1 17 81

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER 612 1-596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE 	25. NAME (Print) E MILLER	26. Date Accepted M D Y 1 17 81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M D Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER 219 924-4370	
37. COMMENTS TO 211R T-50 9/17/81 Jim			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE 	39. NAME (Print) F. DUNFEE	40. Date Accepted M D Y 9 17 81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M D Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000913

A 29920

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Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION							
1. COMPANY NAME		2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS Call Chemtrec For Emergency 800-470-9300				
Milwaukee Solvents & Chemicals		WID023350192					
4. P.O. BOX OR STREET ADDRESS							
14765 West Bobolink Avenue							
5. CITY, STATE, ZIP CODE		6. TELEPHONE NUMBER					
Menomonee Falls, WI 53051		(414) 252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	1500	Waste Solvent N.O.S.	Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	F003	2500
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE Terry Dietrich		16. NAME (Print) Terry Dietrich	17. DATE SHIPPED M / D / Y 1/22/81

TRANSPORTER SECTION			
18. COMPANY NAME		19. EPA IDENTIFICATION NO.	
Mr. Frank, Inc.		ILD069506160	
20. P.O. BOX OR STREET ADDRESS			
201 West 155th Street			
21. CITY, STATE, ZIP CODE		22. TELEPHONE NUMBER	
South Holland, Illinois 60473		(312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE D. H. L. H. B. C. 7	25. NAME (Print) D. H. L. H. B. C. 7	26. Date Accepted 9/22/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME		33. EPA IDENTIFICATION NO.	
American Chemical		IND016360265	
34. P.O. BOX OR STREET ADDRESS			
420 South Colfax Road			
35. CITY, STATE, ZIP CODE		36. TELEPHONE NUMBER	
Griffith, Indiana		219 924-4370	
37. COMMENTS To 210X T-50 9/22/81 JRM			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE R. H. L. H. B. C. 7	39. NAME (Print) R. H. L. H. B. C. 7	40. Date Accepted 9/22/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE 1	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

A 29921

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Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION			
1. COMPANY NAME <i>Milwaukee Solvents + Chemicals</i>		2. EPA IDENTIFICATION NO. <i>WI0023350192</i>	
3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS <i>14765 West Bobolink Ave</i>			
5. CITY, STATE, ZIP CODE <i>Menomonee Falls, WI 53051</i>		6. TELEPHONE NUMBER <i>14141252-3550</i>	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS
<i>1 Tanker</i>	<i>5000</i>	<i>Waste Solvent NOS</i>	<i>flammable liquid</i>
11. US DOT IDENTIFICATION NUMBER <i>UN1493</i>		12. PHYSICAL STATE (Enter number in box)	
		1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	
		1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>	
		1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>	
13. US EPA WASTE CODE <i>F005</i>		14. SHIPPING WEIGHT (Pounds) <i>55,000</i>	
15. AUTHORIZED SIGNATURE <i>Terry J. Dietrich</i>		16. NAME (Print) <i>Terry J. Dietrich</i>	
17. DATE SHIPPED M / D / Y <i>9/29/81</i>			

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

TRANSPORTER SECTION			
18. COMPANY NAME <i>Mr Frank Fine</i>		19. EPA IDENTIFICATION NO. <i>IL0069505160</i>	
20. P.O. BOX OR STREET ADDRESS <i>201 West 155th Street</i>			
21. CITY, STATE, ZIP CODE <i>South Holland IL 60473</i>		22. TELEPHONE NUMBER <i>(312) 596-3370</i>	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) <i>C E Miller</i>	26. Date Accepted <i>9/29/81</i>	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	
		31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME <i>American Chemical</i>		33. EPA IDENTIFICATION NO. <i>IN00016360285</i>	
34. P.O. BOX OR STREET ADDRESS <i>1420 South College</i>			
35. CITY, STATE, ZIP CODE <i>Griffith Indiana</i>		36. TELEPHONE NUMBER <i>817-447-9570</i>	
37. COMMENTS <i>To 2107c 9/29/81 T-50 grom.</i>			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) <i>F D N FINE</i>	40. Date Accepted <i>9/29/81</i>	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000916

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER

A 29922

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME <i>M. H. Lee & Sons</i>		2. EPA IDENTIFICATION NO. <i>WI0023350152</i>		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS <i>2745 W. Robert Ave</i>								
5. CITY, STATE, ZIP CODE <i>Menomonie WI 54751</i>		6. TELEPHONE NUMBER <i>(715) 232-3550</i>						
7. NUMBER & TYPE OF CONTAINER <i>1 Tanker</i>	8. GALLONS <i>5000</i>	9. WASTE NAME <i>White Stencil NOS</i>		10. US DOT HAZARD CLASS <i>Flammable liquid</i>	11. US DOT IDENTIFICATION NUMBER <i>UN1953</i>	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE <i>F003</i>	14. SHIPPING WEIGHT (Pounds) <i>14,000</i>
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Terry J. Reichenbach</i>		16. NAME (Print) <i>Terry DiGregorio</i>		17. DATE SHIPPED M / D / Y <i>10/2/81</i>

TRANSPORTER SECTION			
18. COMPANY NAME <i>M. Frank Inc.</i>		19. EPA IDENTIFICATION NO. <i>WI0000506160</i>	
20. P.O. BOX OR STREET ADDRESS <i>201 West 185th Street</i>			
21. CITY, STATE, ZIP CODE <i>Menomonie WI 54751</i>		22. TELEPHONE NUMBER <i>(715) 232-3327</i>	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>CE Milburn</i>	25. NAME (Print) <i>CE MILBURN</i>	26. Date Accepted M / D / Y <i>10/2/81</i>	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME <i>Amvco Chemical</i>		33. EPA IDENTIFICATION NO. <i>WI0000160015</i>	
34. P.O. BOX OR STREET ADDRESS <i>120 South 1st St.</i>			
35. CITY, STATE, ZIP CODE <i>Port Hope, WI 54981</i>		36. TELEPHONE NUMBER <i>(920) 425-4021</i>	
37. COMMENTS <i>To 21072 T-50 10/2/81</i>			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Edwin F. F...</i>	39. NAME (Print) <i>EDWIN F...</i>	40. Date Accepted M / D / Y <i>10/2/81</i>	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000915

A 29923

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WI0023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER 414 1-252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 5000	9. WASTE NAME Waste Solvent N.O.S.		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. USE EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 36000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Terry Dietrich</i>		16. NAME (Print) Terry Dietrich		17. DATE SHIPPED M D Y 10 17 81

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER 312 1-596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>Michael Martin</i>	25. NAME (Print) MICHAEL MARTIN	26. Date Accepted 10 17 81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M D Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER 219 1-924-4370
37. COMMENTS TO 210R T-50 10/17/81 Jmm		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>Edunfee</i>	39. NAME (Print) EDUNFEE	40. Date Accepted 10 17 81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M D Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000914

A 29924

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION													
1. COMPANY NAME Milwaukee Solvents & Chemicals				2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS							
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue													
5. CITY, STATE, ZIP CODE menomonee Falls, WI 53051				6. TELEPHONE NUMBER 414 252-3550									
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME			10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)			
(1) Tanker	4,500	Waste Solvent N.O.S			Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid		F003				
							1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid						
							1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid						
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.						15. AUTHORIZED SIGNATURE <i>Mark Z...</i>			16. NAME (Print) MARK Z...		17. DATE SHIPPED M / D / Y 10/15/81		

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER 312 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>CE Milburn</i>	25. NAME (Print) CE MILBURN	26. Date Accepted 10/15/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Calfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER 219 924-4370	
37. COMMENTS TO 211K T-50 10/15/81 gpm			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Frank</i>	39. NAME (Print) F. DUNFEE	40. Date Accepted 10/15/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000917

A 29928

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION			
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WI0003350192	
3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 11765 West Fosholink Ave			
5. CITY, STATE, ZIP CODE Menomonee Falls WI 53051		6. TELEPHONE NUMBER (111) 252-3550	
7. NUMBER & TYPE OF CONTAINER 1 Tanker	8. GALLONS 5000	9. WASTE NAME Waste Solvent NOS.	10. US DOT HAZARD CLASS Flammable Liquid
		11. US DOT IDENTIFICATION NUMBER UN1113	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>
			13. US EPA WASTE CODE F003
			14. SHIPPING WEIGHT (Pounds)
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.			
15. AUTHORIZED SIGNATURE		16. NAME (Print)	
		17. DATE SHIPPED M / D / Y 1 / 1	

TRANSPORTER SECTION			
18. COMPANY NAME Mr Frank		19. EPA IDENTIFICATION NO. IL0064306160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland IL 60473		22. TELEPHONE NUMBER (312) 576-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE Michael D. Martin	25. NAME (Print) MICHAEL MARTIN	26. Date Accepted 10/26/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	
		31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IN201630265	
34. P.O. BOX OR STREET ADDRESS 120 South College Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (317) 924-4270	
37. COMMENTS To 210x T-50 10/26/81 gpm			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE Michael D. Martin	39. NAME (Print) MICHAEL MARTIN	40. Date Accepted 10/26/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000919

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

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HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144

FORM 4400-66

9-80

MANIFEST NUMBER

A 29929

GENERATOR (SHIPPER) SECTION																			
1. COMPANY NAME Milwaukee Solvents & Chemicals				2. EPA IDENTIFICATION NO. WI00023350192		3. COMMENTS/SPECIAL INSTRUCTIONS													
4. P.O. BOX OR STREET ADDRESS 14765 West Cabotlink Ave																			
5. CITY, STATE, ZIP CODE Menomonee Falls						6. TELEPHONE NUMBER (714) 252-3550													
7. NUMBER & TYPE OF CONTAINER		8. GALLONS		9. WASTE NAME				10. US DOT HAZARD CLASS		11. US DOT IDENTIFICATION NUMBER		12. PHYSICAL STATE (Enter number in box)		13. US EPA WASTE CODE		14. SHIPPING WEIGHT (Pounds)			
												1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid							
1. Tanker		5000		Waste Solvent NOS				7 (Inflam)		(11143)		1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		F003		16,000			
												1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid							
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.										15. AUTHORIZED SIGNATURE Terry Dietrich				16. NAME (Print) Terry Dietrich				17. DATE SHIPPED M / D / Y 11/12/81	

TRANSPORTER SECTION			
18. COMPANY NAME M. Frank Inc.		19. EPA IDENTIFICATION NO. WI000150160	
20. P.O. BOX OR STREET ADDRESS 10114 1st St			
21. CITY, STATE, ZIP CODE Moline IL 61201		22. TELEPHONE NUMBER (312) 596-5770	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE CE Milburn		25. NAME (Print) CE MILBURN	
		26. Date Accepted 11/2/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	
		31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME Abraham Chemicals		33. EPA IDENTIFICATION NO. WI00016261265	
34. P.O. BOX OR STREET ADDRESS 120 South Calhoun Ave			
35. CITY, STATE, ZIP CODE Columbia IL 62202		36. TELEPHONE NUMBER (314) 931-4725	
37. COMMENTS To 211K T-50 6100 11/2/81			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE J. Miller		39. NAME (Print) J. MILLER	
		40. Date Accepted 11/2/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000918

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER

A 29932

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION													
1. COMPANY NAME Milwaukee Solvents & Chemicals				2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS							
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue													
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051				6. TELEPHONE NUMBER (414) 252-3550									
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME			10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number, in box)		13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)			
(1) Tanker	4,500	Waste Solvent N.O.S.			Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid <input checked="" type="checkbox"/>		F003	32000			
							1. Solid 3. Mixture 2. Liquid <input type="checkbox"/>						
							1. Solid 3. Mixture 2. Liquid <input type="checkbox"/>						
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.						15. AUTHORIZED SIGNATURE <i>Terry Dietrich</i>				16. NAME (Print) Terry Dietrich		17. DATE SHIPPED M / D / Y 11 / 15 / 81	

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Robert Perkins</i>	25. NAME (Print) Robert Perkins	26. Date Accepted 11 M 15 D 81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER 219 1924-4370	
37. COMMENTS TO 211 K. T-50 GRAY. 11/5/81			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Robert Perkins</i>	39. NAME (Print) Robert Perkins	40. Date Accepted 11 M 15 D 81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000921

A 29934

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION							
1. COMPANY NAME		2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS				
Milwaukee Solvents & Chemicals		WID023350192					
4. P.O. BOX OR STREET ADDRESS							
14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE		6. TELEPHONE NUMBER					
Menomonee Falls, WI 53051		(414) 252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	5000	Waste Solvent N.O.S.	Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	F003	36,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE		16. NAME (Print)	
				Terry Dietrich		17. DATE SHIPPED M / D / Y 11 / 19 / 81	

TRANSPORTER SECTION			
18. COMPANY NAME		19. EPA IDENTIFICATION NO.	
Mr. Frank, Inc.		ILD069506160	
20. P.O. BOX OR STREET ADDRESS			
201 West 155th Street			
21. CITY, STATE, ZIP CODE		22. TELEPHONE NUMBER	
South Holland, Illinois 60473		312 576 1331	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE		25. NAME (Print)	26. Date Accepted
Michael Martin		MICHAEL MARTIN	11 / 19 / 81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME		33. EPA IDENTIFICATION NO.	
American Chemical		IND016360265	
34. P.O. BOX OR STREET ADDRESS			
420 South Colfax Road			
35. CITY, STATE, ZIP CODE		36. TELEPHONE NUMBER	
Griffith, Indiana		(219) 924-4370	
37. COMMENTS			
To 211K T-50 GRM 11/19/81			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE		39. NAME (Print)	40. Date Accepted
Michael Martin		EDUNICE	11 / 19 / 81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000920

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER

A 29935

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION							
1. COMPANY NAME		2. EPA IDENTIFICATION NO.	3. COMMENTS/SPECIAL INSTRUCTIONS				
Milwaukee Solvents & Chemicals		WID023350192					
4. P.O. BOX OR STREET ADDRESS							
14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE		6. TELEPHONE NUMBER					
Menomonee Falls, Wisconsin 53051		(414) 252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	5000	Waste Solvent N.O.S.	Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	F003	36.00
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Terry Dietrich</i>		16. NAME (Print) Terry Dietrich	
						17. DATE SHIPPED M D Y 11/12/81	

TRANSPORTER SECTION		
18. COMPANY NAME		19. EPA IDENTIFICATION NO.
Mr. Frank, Inc.		ILDO69506160
20. P.O. BOX OR STREET ADDRESS		
201 West 155th Street		
21. CITY, STATE, ZIP CODE		22. TELEPHONE NUMBER
South Holland, Illinois 60473		(312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>Michael Martin</i>	25. NAME (Print) MICHAEL MARTIN	26. Date Accepted 11/12/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME		33. EPA IDENTIFICATION NO.
American Chemical		IND016360265
34. P.O. BOX OR STREET ADDRESS		
420 South Colfax Road		
35. CITY, STATE, ZIP CODE		36. TELEPHONE NUMBER
Griffith, Indiana		(317) 924-4370
37. COMMENTS		
To 210 TK T-SO GRM 11/12/81		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>F. Dunfee</i>	39. NAME (Print) F. DUNFEE	40. Date Accepted 11/12/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000922

A 29936

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME <i>Pharmaceuticals, Inc.</i>		2. EPA IDENTIFICATION NO. <i>1000000001</i>		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS <i>1000000001 Ave</i>								
5. CITY, STATE, ZIP CODE <i>Madison, WI 53701</i>		6. TELEPHONE NUMBER <i>(608) 259-5000</i>						
7. NUMBER & TYPE OF CONTAINER <i>1 Tank</i>	8. GALLONS <i>4700</i>	9. WASTE NAME <i>1000000001</i>		10. US DOT HAZARD CLASS <i>11</i>	11. US DOT IDENTIFICATION NUMBER <i>0111143</i>	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE <i>F003</i>	14. SHIPPING WEIGHT (Pounds) <i>36,000</i>
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described and labeled and are in proper condition for transportation according to the U.S. Department of Transportation and the Wis. Department of Transportation.				15. AUTHORIZED SIGNATURE <i>Timothy D. ...</i>		16. NAME (Print) <i>Timothy D. ...</i>		17. DATE SHIPPED M / D / Y <i>11/24/81</i>

TRANSPORTER SECTION		
18. COMPANY NAME <i>Mc Truck Inc.</i>		EPA IDENTIFICATION NO. <i>1000000001</i>
20. P.O. BOX OR STREET ADDRESS <i>1000000001</i>		
21. CITY, STATE, ZIP CODE <i>Madison, WI 53701</i>		TELEPHONE NUMBER <i>(608) 259-5000</i>
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>Timothy D. ...</i>	25. NAME (Print) <i>Timothy D. ...</i>	26. Date Accepted <i>11/24/81</i>
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME	28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME <i>Advanced ...</i>		33. EPA IDENTIFICATION NO. <i>1000000001</i>
34. P.O. BOX OR STREET ADDRESS <i>1000000001</i>		
35. CITY, STATE, ZIP CODE <i>Madison, WI 53701</i>		36. TELEPHONE NUMBER <i>(608) 259-5000</i>
37. COMMENTS <i>To 210 TK TSC 6RM 11/24/81</i>		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>Timothy D. ...</i>	39. NAME (Print) <i>Timothy D. ...</i>	40. Date Accepted <i>11/24/81</i>
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000924

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144
FORM 4400-66

9-80

MANIFEST NUMBER

A 29937

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION													
1. COMPANY NAME <i>M. J. Lee Solvent Chemical</i>		2. EPA IDENTIFICATION NO. <i>WI002330152</i>		3. COMMENTS/SPECIAL INSTRUCTIONS									
4. P.O. BOX OR STREET ADDRESS <i>19115 West Ashland Avenue</i>													
5. CITY, STATE, ZIP CODE <i>Menomonee Falls W.I. 53051</i>		6. TELEPHONE NUMBER <i>(111)-222-2500</i>											
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)				
<i>1 drum</i>	<i>5000</i>	<i>Black Solvent NOC</i>		<i>1.1</i>	<i>111593</i>	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid		<i>1003</i>	<i>1100</i>				
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid							
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid							
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Department of Transportation.				15. AUTHORIZED SIGNATURE <i>Tony J. Lee</i>		16. NAME (Print) <i>Tony J. Lee</i>		17. DATE SHIPPED M / D / Y <i>11/15/81</i>					

TRANSPORTER SECTION			
18. COMPANY NAME <i>M. J. Lee</i>			
20. P.O. BOX OR STREET ADDRESS <i>19115 West Ashland Avenue</i>			
21. CITY, STATE, ZIP CODE <i>Menomonee Falls W.I. 53051</i>			
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Tony J. Lee</i>	25. NAME (Print) <i>Tony J. Lee</i>	26. Date Accepted <i>11/15/81</i>	
I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME <i>M. J. Lee Solvent Chemical</i>		33. EPA IDENTIFICATION NO. <i>WI002330152</i>	
34. P.O. BOX OR STREET ADDRESS <i>19115 West Ashland Avenue</i>			
35. CITY, STATE, ZIP CODE <i>Menomonee Falls W.I. 53051</i>		36. TELEPHONE NUMBER <i>(111)-222-2500</i>	
37. COMMENTS <i>To 2107C TSO GRW 11/15/81</i>			
I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Tony J. Lee</i>	39. NAME (Print) <i>Tony J. Lee</i>	40. Date Accepted <i>11/15/81</i>	
I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-422-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

000923

A 29940

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION													
1. COMPANY NAME <i>Milwaukee Salvage & Removal</i>				2. EPA IDENTIFICATION NO. <i>11102-550142</i>		3. COMMENTS/SPECIAL INSTRUCTIONS							
4. P.O. BOX OR STREET ADDRESS <i>17701 W. 1st St. Bldg. A-100</i>													
5. CITY, STATE, ZIP CODE <i>Wauwatosa WI 53190</i>				6. TELEPHONE NUMBER <i>414-252-3850</i>									
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME				10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)		
<i>17. 60</i>	<i>3000</i>	<i>Waste Solvent NOS</i>				<i>3</i>	<i>AA1993</i>	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid		<i>1003</i>	<i>36,000</i>		
								1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid					
								1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid					
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.						15. AUTHORIZED SIGNATURE <i>[Signature]</i>				16. NAME (Print) <i>George D. [unclear]</i>		17. DATE SHIPPED M / D / Y <i>12/10/81</i>	

TRANSPORTER SECTION			
18. COMPANY NAME <i>Wauwatosa Transfer</i>		19. EPA IDENTIFICATION NO. <i>11102-550140</i>	
20. P.O. BOX OR STREET ADDRESS <i>101 West [unclear] Road</i>			
21. CITY, STATE, ZIP CODE <i>Wauwatosa WI 53190</i>		22. TELEPHONE NUMBER <i>(414) 996-1177</i>	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) <i>MARY DOLAN</i>	26. Date Accepted <i>12/12/81</i>	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME <i>Wauwatosa Chemical</i>		33. EPA IDENTIFICATION NO. <i>11102-550140</i>	
34. P.O. BOX OR STREET ADDRESS <i>400 [unclear] [unclear]</i>			
35. CITY, STATE, ZIP CODE <i>Wauwatosa WI 53190</i>		36. TELEPHONE NUMBER <i>(414) 996-1177</i>	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) <i>ADRIAN [unclear]</i>	40. Date Accepted M / D / Y <i>12/18/81</i>	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211K T-50 GRM 12/2/81

000925

A 29941

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION			3. COMMENTS/SPECIAL INSTRUCTIONS						
1. COMPANY NAME		2. EPA IDENTIFICATION NO.							
Milwaukee Solvents & Chemicals		WID023350192							
4. P.O. BOX OR STREET ADDRESS		6. TELEPHONE NUMBER							
14765 W. Bobolink Avenue		414 1-252-3550							
5. CITY, STATE, ZIP CODE		6. TELEPHONE NUMBER							
Menomonee Falls, WI 53051		414 1-252-3550							
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)	
(1) Tanker	4500	Waste Solvent N.O.S.		Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	F003		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		36000	
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid			
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE		16. NAME (Print)		17. DATE SHIPPED M / D / Y	
				Terry Dietrich		Terry Dietrich		12/17/81	

TRANSPORTER SECTION		
18. COMPANY NAME		19. EPA IDENTIFICATION NO.
Mr. Frank, Inc.		ILD069506160
20. P.O. BOX OR STREET ADDRESS		
201 West 155th Street		
21. CITY, STATE, ZIP CODE		22. TELEPHONE NUMBER
South Holland, Illinois 60473		() -
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted
[Signature]	Cathy Drifan	12/19/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted
		M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME		33. EPA IDENTIFICATION NO.
American Chemical		IND016360265
34. P.O. BOX OR STREET ADDRESS		
420 South Colfax Road		
35. CITY, STATE, ZIP CODE		36. TELEPHONE NUMBER
Griffith, Indiana		(219) 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted
[Signature]	EDWIN	12/18/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted
		M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 K T-50. GRM 12/17/81

000926

A 29942

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION													
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS									
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue													
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550											
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 5000	9. WASTE NAME Waste Solvent N.O.S.		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>		13. USE EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 1000				
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>							
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>							
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>[Signature]</i>		16. NAME (Print) Ken Block			17. DATE SHIPPED M / D / Y 12/10/81				

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER 312 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) CARLY DRYDEN	26. Date Accepted 12/10/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER 219 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) DAVID E. I...	40. Date Accepted 12/10/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 211 K T-50 6PM
12/10/81

000927

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

9-80

MANIFEST NUMBER

A 29944

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION																									
1. COMPANY NAME Milwaukee Solvents & Chemicals				2. EPA IDENTIFICATION NO. WID023350192				3. COMMENTS/SPECIAL INSTRUCTIONS																	
4. P.O. BOX OR STREET ADDRESS 14765 West Boholink Avenue																									
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051				6. TELEPHONE NUMBER (414) 252-3550																					
7. NUMBER & TYPE OF CONTAINER		8. GALLONS		9. WASTE NAME				10. US DOT HAZARD CLASS		11. US DOT IDENTIFICATION NUMBER		12. PHYSICAL STATE (Enter number in box)		13. US EPA WASTE CODE		14. SHIPPING WEIGHT (Pounds)									
(1) Tanker		4750 4750		Waste Solvent N.O.S.				Flammable Liquid		UN1993		1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input checked="" type="checkbox"/>		F003		3000									
												1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>													
												1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>													
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.														15. AUTHORIZED SIGNATURE <i>Tony Ruben</i>				16. NAME (Print) <i>Tony Ruben</i>				17. DATE SHIPPED M / D / Y 12 / 18 / 81			

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>C. E. Milburn</i>		25. NAME (Print) C. E. MILBURN	
		26. Date Accepted M / D / Y 12 / 18 / 81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	
		31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Frank</i>		39. NAME (Print) FRANK	
		40. Date Accepted M / D / Y 12 / 18 / 81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211 RT-SO
EPA 12/18/81

000928

A 29946

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION					
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS	
4. P.O. BOX OR STREET ADDRESS 14765 W. Dobolink Avenue					
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550			
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 7500	9. WASTE NAME Waste Solvent N.O.S.	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>
					13. US EPA WASTE CODE F003
					14. SHIPPING WEIGHT (Pounds) 11000
15. AUTHORIZED SIGNATURE <i>Teig / R.H.</i>			16. NAME (Print) <i>Teig / R.H.</i>		17. DATE SHIPPED M / D / Y 1 / 21 / 82

This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER 312 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>Stephen</i>	25. NAME (Print) STEPHEN	26. Date Accepted M / D / Y 1 / 21 / 82
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER 219 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>EDWARD</i>	39. NAME (Print) EDWARD	40. Date Accepted M / D / Y 1 / 21 / 82
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 205 R 7:50
GRM 1/21/82

129200

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER

A 29951

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION						
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS		
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue						
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550				
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)
(1) Tanker	5000	Waste Solvent N.O.S.		Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Terry Dietrich</i>		16. NAME (Print) Terry Dietrich
						17. DATE SHIPPED M / D / Y 2 / 8 / 82

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILLD069506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER 312 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>Joseph D. Frank</i>	25. NAME (Print) JOSEPH D. FRANK	26. Date Accepted 2 / 8 / 82
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016380265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER 219 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>Bob Mauck</i>	39. NAME (Print) BOB MAUCK	40. Date Accepted 2 / 8 / 82
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210 K T-50
GLM 2/8/82

002622

A 29952

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION							
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tankor	5000	Waste Solvent N.O.S.	Flammable Liquid	UN1993	1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>	F005	30.000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Terry D. ...</i>		16. NAME (Print) Terry D. ...	17. DATE SHIPPED M / D / Y 2/15/82

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>My ...</i>	25. NAME (Print) ...	26. Date Accepted 2/15/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND01630265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Bob Mauck</i>	39. NAME (Print) BOB MAUCK	40. Date Accepted 2/15/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210K T-50
GPM 2/15/82

002624

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

9-80

A 29960

GENERATOR (SHIPPER) SECTION									
1. COMPANY NAME <i>M. J. Lee & Sons "Home"</i>		2. EPA IDENTIFICATION NO. <i>W10003350152</i>		3. COMMENTS/SPECIAL INSTRUCTIONS					
4. P.O. BOX OR STREET ADDRESS <i>11745 W. 1st St. Beloit</i>									
5. CITY, STATE, ZIP CODE <i>Bellevue WI 53505</i>		6. TELEPHONE NUMBER <i>914 1-502-350</i>							
7. NUMBER & TYPE OF CONTAINER <i>1 drums</i>	8. GALLONS	9. WASTE NAME <i>6.0% HCL / VOS</i>		10. US DOT HAZARD CLASS <i>3</i>	11. US DOT IDENTIFICATION NUMBER <i>1000-3</i>	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE <i>F003</i>	14. SHIPPING WEIGHT (Pounds) <i>30,000</i>	
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid			
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid			
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Frank Lee</i>		16. NAME (Print) <i>Frank Lee</i>		17. DATE SHIPPED M / D / Y <i>11-1-82</i>	

TRANSPORTER SECTION			
18. COMPANY NAME <i>Mr Frank Lee</i>		19. EPA IDENTIFICATION NO. <i>W-00003350160</i>	
20. P.O. BOX OR STREET ADDRESS <i>11745 W 1st St</i>			
21. CITY, STATE, ZIP CODE <i>Bellevue WI 53505</i>		22. TELEPHONE NUMBER <i>(914) 1-502-350</i>	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Michael Martin</i>	25. NAME (Print) <i>MR MICHAEL MARTIN</i>	26. Date Accepted <i>11/9/82</i>	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME <i>American Chemical</i>		33. EPA IDENTIFICATION NO. <i>W10003350152</i>	
34. P.O. BOX OR STREET ADDRESS <i>410 W. 1st St. Beloit</i>			
35. CITY, STATE, ZIP CODE <i>Bellevue WI 53505</i>		36. TELEPHONE NUMBER <i>914 1-502-350</i>	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Bob Mauck</i>	39. NAME (Print) <i>Bob Mauck</i>	40. Date Accepted <i>11/9/82</i>	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

*To 210 K T-50 GRM
2/19/82*

002623

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER

A 29961

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WI0023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14115 East Columbia Ave								
5. CITY, STATE, ZIP CODE Ashland Falls WI 54801		6. TELEPHONE NUMBER (715) 252-3550						
7. NUMBER & TYPE OF CONTAINER 1 Drum	8. GALLONS 5000	9. WASTE NAME Unk Solvent NOS		10. US DOT HAZARD CLASS 3	11. US DOT IDENTIFICATION NUMBER 1011	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE D001	14. SHIPPING WEIGHT (Pounds) 36000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE Terry J. Dole		16. NAME (Print) Terry J. Dole		17. DATE SHIPPED M / D / Y 3 / 9 / 82

TRANSPORTER SECTION			
18. COMPANY NAME The Tank Co.		19. EPA IDENTIFICATION NO. IL0005500160	
20. P.O. BOX OR STREET ADDRESS 401 West 1st St			
21. CITY, STATE, ZIP CODE South Elmhurst IL 60173		22. TELEPHONE NUMBER (708) 1-266-3373	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE [Signature]	25. NAME (Print) CARY DRAKE	26. Date Accepted 3M 1982	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME [Signature]		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE [Signature]	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. TNP-1010-265	
34. P.O. BOX OR STREET ADDRESS 100 South Allen Road			
35. CITY, STATE, ZIP CODE Mills Tennessee		36. TELEPHONE NUMBER (615) 424-4900	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE [Signature]	39. NAME (Print) EDWARD E.	40. Date Accepted 3M 1982	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210 RT-50
GRM 3/9/82

529200

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

9-80

MANIFEST NUMBER

A 29966

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME <i>Chloride Systems (Chemo)</i>		2. EPA IDENTIFICATION NO. <i>61000385012</i>		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS <i>1100 W. Industrial Ave</i>								
5. CITY, STATE, ZIP CODE <i>Madison, WI 53701</i>		6. TELEPHONE NUMBER <i>(608) 450-3500</i>						
7. NUMBER & TYPE OF CONTAINER <i>1 Drum</i>	8. GALLONS <i>5500</i>	9. WASTE NAME <i>Chloride Systems Waste</i>		10. US DOT HAZARD CLASS <i>1.1</i>	11. US DOT IDENTIFICATION NUMBER <i>11111</i>	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE <i>F003</i>	14. SHIPPING WEIGHT (Pounds) <i>6,000</i>
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Tommy R. Loh</i>		16. NAME (Print) <i>Tommy R. Loh</i>		17. DATE SHIPPED M / D / Y <i>3 / 23 / 82</i>

TRANSPORTER SECTION		
18. COMPANY NAME <i>Chloride Systems</i>		19. EPA IDENTIFICATION NO. <i>71001501160</i>
20. P.O. BOX OR STREET ADDRESS <i>1100 W. Industrial Ave</i>		
21. CITY, STATE, ZIP CODE <i>Madison, WI 53701</i>		22. TELEPHONE NUMBER <i>(608) 450-3500</i>
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>Tommy R. Loh</i>	25. NAME (Print) <i>Tommy R. Loh</i>	26. Date Accepted M / D / Y <i>3 / 23 / 82</i>
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME <i>Chloride Systems</i>		33. EPA IDENTIFICATION NO. <i>71001501160</i>
34. P.O. BOX OR STREET ADDRESS <i>1100 W. Industrial Ave</i>		
35. CITY, STATE, ZIP CODE <i>Madison, WI 53701</i>		36. TELEPHONE NUMBER <i>(608) 450-3500</i>
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>Tommy R. Loh</i>	39. NAME (Print) <i>Tommy R. Loh</i>	40. Date Accepted M / D / Y <i>3 / 23 / 82</i>
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210K T-50
CWM 3/23/82

A 29968

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION												
1. COMPANY NAME Milwaukee Solvents & Chemicals				2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS						
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue												
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051						6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME				10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		13. US DOT WASTE		
(1) Tanker	5000	Waste Solvent N.O.S.				Flammable Liquid	UN1993	1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		F00		
								1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>				
								1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>				
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.						15. AUTHORIZED SIGNATURE <i>Terry Dickel</i>				16. NAME (Print) Terry Dickel		17. DATE SHIPPED M / D / Y 4/12/82

NO. 000

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) TERRY DICKEL	26. Date Accepted M / D / Y 4/12/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) F DVN TEE	40. Date Accepted M / D / Y 4/18/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 T-50
6PM 4/12/82

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER

A 29969

See reverse side, Copy G, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION				3. COMMENTS/SPECIAL INSTRUCTIONS.			
1. COMPANY NAME <i>M. J. ...</i>		2. EPA IDENTIFICATION NO. <i>WI00-3890152</i>					
4. P.O. BOX OR STREET ADDRESS <i>P.O. Box 444</i>							
5. CITY, STATE, ZIP CODE <i>Menomonie, Wis 54751</i>		6. TELEPHONE NUMBER <i>(715) 238-3350</i>					
7. NUMBER & TYPE OF CONTAINER <i>1 Drum</i>	8. GALLONS <i>500</i>	9. WASTE NAME <i>Used Solvent NO.</i>	10. US DOT HAZARD CLASS <i>Flammable</i>	11. US DOT IDENTIFICATION NUMBER <i>UN1573</i>	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE <i>F003</i>	14. SHIPPING WEIGHT (Pounds) <i>30.00</i>
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Tony J. ...</i>		16. NAME (Print) <i>Tony J. ...</i>	
						17. DATE SHIPPED M / D / Y <i>1/22/82</i>	

TRANSPORTER SECTION			
18. COMPANY NAME <i>M. J. ...</i>		19. EPA IDENTIFICATION NO. <i>IL00-596-210</i>	
20. P.O. BOX OR STREET ADDRESS <i>201 East ...</i>			
21. CITY, STATE, ZIP CODE <i>... IL 600...</i>		22. TELEPHONE NUMBER <i>(312) 596-210</i>	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Michael ...</i>	25. NAME (Print) <i>MICHAEL MARTIN</i>	26. Date Accepted <i>1/22/82</i>	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME <i>... Chemical</i>		33. EPA IDENTIFICATION NO. <i>IL00-596-210</i>	
34. P.O. BOX OR STREET ADDRESS <i>400 South ...</i>			
35. CITY, STATE, ZIP CODE <i>... Indiana</i>		36. TELEPHONE NUMBER <i>(317) 234-4000</i>	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>... FORTNER</i>	39. NAME (Print) <i>FORTNER</i>	40. Date Accepted <i>1/22/82</i>	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 211K T-50 6RM
4.22.82

0029200

A 29979

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION					
1. COMPANY NAME <i>Am. Chemical Solvents</i>		2. EPA IDENTIFICATION NO. <i>WID02550191</i>		3. COMMENTS/SPECIAL INSTRUCTIONS	
4. P.O. BOX OR STREET ADDRESS <i>14765 W. Bob Link Ave.</i>					
5. CITY, STATE, ZIP CODE <i>Menomonee Falls WI 53051</i>			6. TELEPHONE NUMBER <i>(414) 251-3550</i>		
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)
<i>11) Tanker</i>	<i>5,500</i>	<i>Waste Solvent N.O.S.</i>	<i>Flammable Liquid</i>	<i>UN1993</i>	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.			15. AUTHORIZED SIGNATURE <i>Robert Hitzler</i>		16. NAME (Print) <i>Robert Hitzler</i>
					17. DATE SHIPPED M / D / Y <i>5 / 10 / 82</i>

TRANSPORTER SECTION		
18. COMPANY NAME <i>Mr Frank Inc</i>		19. EPA IDENTIFICATION NO. <i>ILD069506160</i>
20. P.O. BOX OR STREET ADDRESS <i>201 W. 155 Street</i>		
21. CITY, STATE, ZIP CODE <i>South Holland ILL 60480</i>		22. TELEPHONE NUMBER <i>(312) 596-3377</i>
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) <i>GARY DRUM</i>	26. Date Accepted <i>5/10/82</i>
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME <i>American Chemical</i>		33. EPA IDENTIFICATION NO. <i>IND01630265</i>
34. P.O. BOX OR STREET ADDRESS <i>440 South Caltax Road</i>		
35. CITY, STATE, ZIP CODE <i>Griffith, Indiana</i>		36. TELEPHONE NUMBER <i>(317) 974-4520</i>
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) <i>FDUNFE</i>	40. Date Accepted <i>5/10/82</i>
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

*To 210K T-50
GRM 5-10-82*

002629

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 9-80

MANIFEST NUMBER

A 29983

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION									
1. COMPANY NAME Milwaukee Solvents & Chemicals			2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue									
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051			6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER 1 Tanker	8. GALLONS 5,000.	9. WASTE NAME Waste Solvent NOS			10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input checked="" type="checkbox"/>	13. USE EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 38,000
							1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
							1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.					15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED M / D / Y 5 / 11 / 82

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD065506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER 312 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) GARY DUNN	26. Date Accepted M / D / Y 5 / 11 / 82
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER 219 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) F DUNN	40. Date Accepted M / D / Y 5 / 11 / 82
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211KT-SO GRM
5-29-82

002630

A 29985

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER 414 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 5000	9. WASTE NAME Waste Solvent NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 33,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED M / D / Y 6 13 82

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) John J. Frank	26. Date Accepted M / D / Y 6 13 82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) F. DUNFEE	40. Date Accepted M / D / Y 6 13 82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211KT-50
GRM 6.3.82

002632

A 29986

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION				3. COMMENTS/SPECIAL INSTRUCTIONS				
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192						
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 5000	9. WASTE NAME Waste Solvent NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 5000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
I hereby certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.				15. AUTHORIZED SIGNATURE <i>Robert H. Hertz</i>		16. NAME (Print) Robert H. Hertz		17. DATE SHIPPED M / D / Y 6 / 11 / 82

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 586-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) [Signature]	26. Date Accepted M / D / Y 6 / 11 / 82
I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) FWNIFE	40. Date Accepted M / D / Y 6 / 11 / 82
I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370747. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210 K T-50
GRM 6/11/82

A 132927

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION							
1. COMPANY NAME		2. EPA IDENTIFICATION NO.		3. COMMENTS/SPECIAL INSTRUCTIONS			
Milwaukee Solvents & Chemicals		WID023350192					
4. P.O. BOX OR STREET ADDRESS							
14765 W. Bobalink Avenue							
5. CITY, STATE, ZIP CODE		6. TELEPHONE NUMBER					
Menomonee Falls, WI 53051		(414) 252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Tanker	4,000	Waste Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	F003	
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.			15. AUTHORIZED SIGNATURE		16. NAME (Print)		17. DATE SHIPPED M / D / Y
			Robert Heitzer		Robert Heitzer		6/1/82

TRANSPORTER SECTION			
18. COMPANY NAME		19. EPA IDENTIFICATION NO.	
Mr. Frank, Inc.		ILD065506160	
20. P.O. BOX OR STREET ADDRESS			
201 West 155th Street			
21. CITY, STATE, ZIP CODE		22. TELEPHONE NUMBER	
South Holland, Illinois 60473		(312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted	
Robert Heitzer	Robert Heitzer	6/1/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted	
		M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME		33. EPA IDENTIFICATION	
American Chemical		IND016360265	
34. P.O. BOX OR STREET ADDRESS			
420 South Colfax Road			
35. CITY, STATE, ZIP CODE		36. TELEPHONE NUMBER	
Griffith, Indiana		(219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted	
Robert Heitzer	ROBERT HEITZER	6/1/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted	
		M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO210KT-SO 6LN
6-20-82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER

A 132931

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, Wisconsin 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) TANKER	5,000	Waste Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	F003	40,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED M / D / Y 7/27/82	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 586-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>		25. NAME (Print) FRANK	
		26. Date Accepted M / D / Y 7/27/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	
		31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>		39. NAME (Print) EDV N FEE	
		40. Date Accepted M / D / Y 7/27/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	
46. MAIL TO: Department of Natural Resources Bureau of Solid Waste Management Box 8094 Madison, Wisconsin 53708			
47. Emergency 24 Hour Assistance Telephone Number In Wisconsin (608-266-3232) Outside Wisconsin (800-424-8802)			
FOR DNR USE ONLY			

HAZARDOUS WASTE FACILITY

TO 210 E 7-50
GEM 7-22-82

00265

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 132932

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION					
1. COMPANY NAME Milwaukee Solvents & Chem		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS	
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue					
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550			
7. NUMBER & TYPE OF CONTAINER 1 Tanker	8. GALLONS 700	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>
					13. US EPA WASTE CODE F003
					14. SHIPPING WEIGHT (Pounds) 70,000
15. AUTHORIZED SIGNATURE <i>Robert Heltzer</i>			16. NAME (Print) Robert Heltzer		17. DATE SHIPPED M / D / Y 7/20/81
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.					

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER 312 586-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) [Name]	26. Date Accepted M / D / Y 7/21/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016380265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER 219 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) EDW FEE	40. Date Accepted M / D / Y 7/20/81
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

7-26-82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

REV. 6-81

MANIFEST NUMBER

A 132933

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME MILWAUKEE SOLVENTS & CHEMICALS		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. BOBOLINK AVENUE								
5. CITY, STATE, ZIP CODE MENOMONEE FALLS, WI 53051				6. TELEPHONE NUMBER (414)-252-3550				
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
11 TANKER	5,000	WASTE SOLVENT NOS		FLAMMABLE LIQUID	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	F003	40,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) ROBERT HEITZER		17. DATE SHIPPED M / D / Y 7/17/82

TRANSPORTER SECTION

18. COMPANY NAME MR. FRANK, INC.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 WEST 155TH STREET			
21. CITY, STATE, ZIP CODE SOUTH HOLLAND, ILLINOIS 60473		22. TELEPHONE NUMBER 312 586-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME AMERICAN CHEMICAL		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 SOUTH COLFAX ROAD			
35. CITY, STATE, ZIP CODE GRIFFITH, INDIANA		36. TELEPHONE NUMBER 219 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>E. Dunfee</i>	39. NAME (Print) E. DUNFEE	40. Date Accepted M / D / Y 7/17/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin: (608-266-3232)
Outside Wisconsin: (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

7-10-82-50
KRM 7-10-82

002550

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 132934

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION							
1. COMPANY NAME MILWAUKEE SOLVENTS & CHEMICALS		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W BOBOLINK AVENUE							
5. CITY, STATE, ZIP CODE MENOMONEE FALLS, WI 53051				6. TELEPHONE NUMBER (414) 252-3550			
7. NUMBER & TYPE OF CONTAINER 1 TANKER	8. GALLONS 4,500	9. WASTE NAME WASTE SOLVENT NOS		10. US DOT HAZARD CLASS FLAMMABLE LIQUID	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid	14. SHIPPING WEIGHT (Pounds) 31,500
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid	
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) ROBERT HEITZER	
						17. DATE SHIPPED M / D / Y 8/13/82	

TRANSPORTER SECTION		
18. COMPANY NAME MR. FRANK, INC.		19. EPA IDENTIFICATION NO. ILD069506160
20. P.O. BOX OR STREET ADDRESS 201 WEST 155th STREET		
21. CITY, STATE, ZIP CODE SOUTH HOLLAND, ILLINOIS 60473		22. TELEPHONE NUMBER (312) 586-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) EDUNFEE	26. Date Accepted M / D / Y 8/13/82
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME AMERICAN CHEMICAL		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 SOUTH COLFAX ROAD		
35. CITY, STATE, ZIP CODE GRIFFITH, INDIANA		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) EDUNFEE	40. Date Accepted M / D / Y 8/13/82
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY	
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HAZARDOUS WASTE FACILITY

To 210-2-50 6/11/82
8-13-82

002630

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER

A 132935

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION				3. COMMENTS/SPECIAL INSTRUCTIONS			
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192					
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 5000	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 33,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED M / D / Y 8/17/82	

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. WM ILDO69506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 586-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) CHRYSTOPHER	26. Date Accepted M / D / Y 8/17/82
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. INDO16360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) FDUNFEE	40. Date Accepted M / D / Y 8/17/82
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0210KT-SO GRM
8-17-82

002637

MANIFEST NUMBER
A 132946

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION									
1. COMPANY NAME Milwaukee Solvents & Chemicals			2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue									
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051			6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS			10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 21,500
							1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
							1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.					15. AUTHORIZED SIGNATURE <i>Robert Heizer</i>		16. NAME (Print) Robert Heizer		17. DATE SHIPPED M / D / Y 9/15/82

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>Milwaukee</i>	25. NAME (Print) Milwaukee	26. Date Accepted M / D / Y 9/15/82
I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. INDO16360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>FOUNLEE</i>	39. NAME (Print) FOUNLEE	40. Date Accepted M / D / Y 09/02/82
I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608) 266-3232
Outside Wisconsin (800) 424-8802

FOR DNR USE ONLY	
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HAZARDOUS WASTE FACILITY

To 205R T-50
FORM 9-3-82

002059

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81.

MANIFEST NUMBER

A 132948

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE FD03	14. SHIPPING WEIGHT (Pounds) 31,500
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED M / D / Y 11/24/92

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 586-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) Edward H. Frank	26. Date Accepted M / D / Y 11/29/92
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) FDUNFEE	40. Date Accepted M / D / Y 12/2/92
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 E 7-50
6/11/94 2:22 PM

00200

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

REV. 6-81

MANIFEST NUMBER

A 132949

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI58051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 31,500
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED 10/1/82

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Robert W. Prosser</i>	25. NAME (Print) Robert W. Prosser	26. Date Accepted 10/9/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Robert W. Prosser</i>	39. NAME (Print) FDVWFEE	40. Date Accepted 10/1/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210KT-50
10/1/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-56 REV. 6-81

MANIFEST NUMBER
A 132956

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION				3. COMMENTS/SPECIAL INSTRUCTIONS			
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192					
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 5,000	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE P003	14. SHIPPING WEIGHT (Pounds) 5,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heltzer</i>		16. NAME (Print) Robert Heltzer	
						17. DATE SHIPPED M / D / Y 10/15/82	

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 586-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y 10/15/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Frank</i>	39. NAME (Print) EDUNFEE	40. Date Accepted M / D / Y 10/15/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO DIOKT-SO
K/M 10/15/82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

REV. 6-81

MANIFEST NUMBER

A 132964

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, Wisconsin 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 31,500
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED M / D / Y 12 / 1 / 82	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 586-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE	25. NAME (Print) <i>Robert Heitzer</i>	26. Date Accepted M / D / Y 12 / 1 / 82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Eduntee</i>	39. NAME (Print) EDUNTEE	40. Date Accepted M / D / Y 12 / 1 / 82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	
46. MAIL TO: Department of Natural Resources Bureau of Solid Waste Management Box 8094 Madison, Wisconsin 53708		47. Emergency 24 Hour Assistance Telephone Number In Wisconsin (608-266-3232) Outside Wisconsin (800-424-8802)	
FOR DNR USE ONLY			

HAZARDOUS WASTE FACILITY

TO HURT-506W
12-1-82

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 132965

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION				3. COMMENTS/SPECIAL INSTRUCTIONS				
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192						
4. P.O. BOX OR STREET ADDRESS 18765 West Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 31,500
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED M / D / Y 12/10/82

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 586-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Michael J. Frank</i>	25. NAME (Print) Michael J. Frank	26. Date Accepted 12/10/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. INDO16360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Edunfer</i>	39. NAME (Print) EDUNFER	40. Date Accepted 12/10/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211K T-50
GPM 12/10/82

002644

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

REV. 6-81

MANIFEST NUMBER

A 132966

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 West Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
11) Tanker	4,500	Waste Solvent NOS		Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	F003	21,500
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED M / D / Y 12/15/82

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Michael J. Frank</i>	25. NAME (Print) Michael J. Frank	26. Date Accepted 12/15/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Edward J. Vane</i>	39. NAME (Print) Edward J. Vane	40. Date Accepted 12/15/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 118K T-50
6:14 12.15.82

002645

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051				6. TELEPHONE NUMBER (414) 252-3550			
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	4,500	Waste Solvent NOS	Flammable Liquid	NA1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	F003	33,750
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED M / D / Y 6 / 14 / 83	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. TLDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Michael Martin</i>	25. NAME (Print) MICHAEL MARTIN	26. Date Accepted 6/14/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>John Doe</i>	39. NAME (Print) JOHN DOE	40. Date Accepted 6/14/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0211E T-50 6PM 6-14-83

A 115628

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 5,000	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE P003	14. SHIPPING WEIGHT (Pounds) 37500
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED M / D / Y 6 / 16 / 83	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) Mr. A. J. [Name]	26. Date Accepted 6/18/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) ED [Name]	40. Date Accepted 6/18/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

T0210RT-SO GRU 6-6-83

HAZARDOUS WASTE FACILITY

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 2525-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 5,000	9. WASTE NAME Waste Solvent NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 40,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert H. Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED M / D / Y 6 12 83

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. IDLO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) [Name]	26. Date Accepted M / D / Y 6 12 83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) EDUNFEZ	40. Date Accepted M / D / Y 6 12 83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 21077-50
EIM 6-22-83

005345

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 115630

See reverse side, Copy G, for instructions:

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION				3. COMMENTS/SPECIAL INSTRUCTIONS			
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192					
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 5000	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 40,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED M / D / Y 6/21/83	

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) [Name]	26. Date Accepted 6/27/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) F DUNFEE	40. Date Accepted 6/27/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210KT-50
ERM 6-27-83

005600

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051				6. TELEPHONE NUMBER (414) 252-3550				
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	4,500	Waste Solvent NOS		Flammable Liquid	NA1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	F003	36,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED M / D / Y 7/12/83

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>CE Milborn</i>	25. NAME (Print) CE MILBORN	26. Date Accepted M / D / Y 7/12/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. INDO16360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Alvin F. Dineen</i>	39. NAME (Print) ALVIN F. DINEEN	40. Date Accepted M / D / Y 7/12/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY	
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HAZARDOUS WASTE FACILITY

TO211K T-50
GRM 7-12-83

See reverse side, Copy G, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION							
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051				6. TELEPHONE NUMBER (414) 252-3550			
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>	
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>	
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED M D Y 7 11 83	

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) EDUNE	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 R T-50
6PM 7-18-83

45500

147 000

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milsolv Company		2. EPA IDENTIFICATION NO. WID023350172		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051				6. TELEPHONE NUMBER (414) 252-3550				
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	4,500	Waste Solvent NOS		Flammable Liquid	NA1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	F003	36,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED M D Y 7 12 83

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M D Y	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

*To 211 RT-50 GRW
7-27-83*

005510

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA 1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 36,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED M / D / Y 8 / 24 / 83	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) [Name]	26. Date Accepted M / D / Y 8 / 24 / 83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemicals		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) [Name]	40. Date Accepted M / D / Y 8 / 24 / 83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

*To 211K 7-50
GPM 8-22-83*

005342

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA 1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 36,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED M D Y 8/24/83

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY	
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HAZARDOUS WASTE FACILITY

TO210RT-50 GRM 8-22-83

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

REV. 6-81

MANIFEST NUMBER

A 115636

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA 1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 36,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heigzer</i>		16. NAME (Print) Robert Heigzer		17. DATE SHIPPED 8-31-83

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) Mr. Frank, Inc.	26. Date Accepted 8-31-83
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) EDUN F975	40. Date Accepted 8-31-83
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211KT-SO 6PM 8-31-83

005340

MANIFEST NUMBER
A 115637

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051				6. TELEPHONE NUMBER (414) 252-3550				
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	4,500	Waste Solvent NOS		Flammable Liquid	NA1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	F003	36,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED M / D / Y 9/12/83

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Robert Perkins</i>	25. NAME (Print) Robert Perkins	26. Date Accepted M / D / Y 9/12/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Edunfee</i>	39. NAME (Print) EDUNFEE	40. Date Accepted M / D / Y 9/12/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY	
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HAZARDOUS WASTE FACILITY

TO 211KT-50 6CM
9-12-83

005539

See reverse side, Copy G, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION															
1. COMPANY NAME Milwaukee Solvents & Chemicals				2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS									
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue															
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051				6. TELEPHONE NUMBER (414) 252-3550											
7. NUMBER & TYPE OF CONTAINER (1) Tanker		8. GALLONS 4,500		9. WASTE NAME Waste Solvent NOS		10. US DOT HAZARD CLASS Flammable Liquid		11. US DOT IDENTIFICATION NUMBER NA1993		12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid		13. US EPA WASTE CODE F003		14. SHIPPING WEIGHT (Pounds) 36,000	
										1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid					
										1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid					
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.										15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED M / D / Y 9 / 19 / 83	

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>		25. NAME (Print) EDUNICEE	
		26. Date Accepted M / D / Y 9 / 19 / 83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	
		31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>		39. NAME (Print) EDUNICEE	
		40. Date Accepted M / D / Y 9 / 19 / 83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211 RT-50
GRM 9-19-83

005538

A 115639

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 36,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED M / D / Y 9/26/83	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) [Name]	26. Date Accepted M / D / Y 9/26/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) [Name]	40. Date Accepted M / D / Y 9/26/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

70210KT-SO GRW
9-26-83

005334

MANIFEST NUMBER
A 115640

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 36,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert H. Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED M / D / Y 11/27/83	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) [Name]	26. Date Accepted M / D / Y 11/27/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) EDIN	40. Date Accepted M / D / Y 11/27/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY	
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HAZARDOUS WASTE FACILITY

To 211 E.T-50
GKM 9.27.83

005330

A 115641

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4100	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 36,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED M / D / Y 9/18/83	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) Michael Hoffman	26. Date Accepted 9/18/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) EDWARD	40. Date Accepted 9/18/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211K T-50 CAM

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See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Meenomonie Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvnet NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 38,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED M / D / Y 11/1/83

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th St			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) Mr. Frank, Inc.	26. Date Accepted M / D / Y 11-1-83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) FDUN Fee	40. Date Accepted M / D / Y 11-1-83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 RT-50 62M 9:29:53

115642

A 115644

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 35,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED M / D / Y 10/11/83	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) [Name]	26. Date Accepted M / D / Y 10/11/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE-FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. INDO16360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) EDUN FEE	40. Date Accepted M / D / Y 10/11/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 205RT-50
EXW 10/11/83

005532

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION			
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192	
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue		3. COMMENTS/SPECIAL INSTRUCTIONS	
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051			
6. TELEPHONE NUMBER (414) 252-3550			
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4500	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid
			11. US DOT IDENTIFICATION NUMBER NA1993
			12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>
			13. US EPA WASTE CODE F003
			14. SHIPPING WEIGHT (Pounds) 36,000
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.			15. AUTHORIZED SIGNATURE <i>Robert Hertz</i>
			16. NAME (Print) Robert Hertz
			17. DATE SHIPPED M / D / Y 7/1/83

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) [Name]	26. Date Accepted M / D / Y 7/1/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) [Name]	40. Date Accepted M / D / Y 7/1/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO21KE T-50 GEM 9:30:83

005533

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-6G REV. 6-81

MANIFEST NUMBER

A 116156

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE P003	14. SHIPPING WEIGHT (Pounds) 36,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heltzer</i>		16. NAME (Print) Robert Heltzer		17. DATE SHIPPED M / D / Y 12/13/83

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) [Name]	26. Date Accepted M / D / Y 12/13/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) EDUNFEI	40. Date Accepted M / D / Y 12/13/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 212 K T-50
ERM 12.13.83

005324

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER

A 116157

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 1,000	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds)
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE Robert Heitzer		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED M / D / Y 12/16/83	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-31	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME Amer		33. EPA IDENTIFICATION NO. IND016360265	
34. ADDRESS al RESS Road		35. TELEPHONE NUMBER (219) 924-4370	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE Frank	39. NAME (Print) EDUNTEE	40. Date Accepted 12/16/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210K 7-50 GPM
12-16-83

00537

MANIFEST NUMBER
A 116177

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION													
1. COMPANY NAME Milwaukee Solvents & Chemicals				2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS							
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue													
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051				6. TELEPHONE NUMBER (414) 252-3550									
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 5000	9. WASTE NAME Waste Solvent NOS				10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA 1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 70,000			
								1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid					
								1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid					
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.						15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED M / D / Y 10/17/83			

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) John L. Frank	26. Date Accepted M / D / Y 10/17/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. INDO16360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) EDUNE	40. Date Accepted M / D / Y 10/17/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
in Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY	
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HAZARDOUS WASTE FACILITY

To 211K T-SD GRM 10.17.83

005331

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

REV. 6-81

MANIFEST NUMBER

A 116178

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 35,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED M / D / Y 10/17/83

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) [Name]	26. Date Accepted M / D / Y 10/17/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) [Name]	40. Date Accepted M / D / Y 10/19/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210 RT-50
6PM 10-19-83

005330

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 116179

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, Wisconsin 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 36,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert H. Hertz</i>		16. NAME (Print) Robert H. Hertz	
						17. DATE SHIPPED M / D / Y 10/21/83	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60873		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) [Name]	26. Date Accepted 10/21/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) F. DUNFEE	40. Date Accepted 10/21/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number

In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210 ET-50
GRM 10.21.83

005028

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER

A 116186

See reverse side, Copy G, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION															
1. COMPANY NAME Milwaukee Solvents & Chemicals				2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS									
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue															
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051				6. TELEPHONE NUMBER (414) 252-3550											
7. NUMBER & TYPE OF CONTAINER		8. GALLONS		9. WASTE NAME		10. US DOT HAZARD CLASS		11. US DOT IDENTIFICATION NUMBER		12. PHYSICAL STATE (Enter number in box)		13. US EPA WASTE CODE		14. SHIPPING WEIGHT (Pounds)	
(1) Tanker		4,500		Waste Solvent NOS		Flammable Liquid		NA 1993		1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>		F003		36,000	
										1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>					
										1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>					
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.						15. AUTHORIZED SIGNATURE <i>Robert Heitz</i>				16. NAME (Print) Robert Heitz				17. DATE SHIPPED M / D / Y 11/2/83	

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>		25. NAME (Print) Mr. Frank, Inc.	
		26. Date Accepted 11/2/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	
		31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. INDO16360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>		39. NAME (Print) EDWIN FEE	
		40. Date Accepted 11/2/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0211KT-50
GRM 11.2.83

005329

A 116187

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	4500	Waste Solvent NOS		Flammable Liquid	NA1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	F003	3600
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED M / D / Y 11/9/83

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) EDV NFE	40. Date Accepted M / D / Y 11/9/83
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TD117E T-50
GRM 11/9/83

120000

A 116190

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Miwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 36,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED 11/23/83	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) Deborah Heitzer	26. Date Accepted 11/23/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER 219 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) Robert Heitzer	40. Date Accepted 11/23/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210KT-SD
GRM 11-22-83

005326

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 36,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED 12/2/83	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) Mr. Frank	26. Date Accepted 12/2/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) FOUNTEE	40. Date Accepted 12/2/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

*To 212 E.T-50
6PM 12-2-83*

005325

A 132974

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	4,500	Waste Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	P003	31,500
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED M / D / Y 11/19/83	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Hughes</i>	39. NAME (Print) EDUNFEE	40. Date Accepted M / D / Y 11/19/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO211R T-50
GRM 1-19-83

005061

See reverse side, copy 2, for instructions.

Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

A 132976

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 31,500
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED M / D / Y 2/11/83

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Mr. Frank</i>	25. NAME (Print) Mr. Frank	26. Date Accepted M / D / Y 2/11/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Bob Mauck</i>	39. NAME (Print) BOB MAUCK	40. Date Accepted M / D / Y 2/11/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 201 FT-50 GEN
2-11-83

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 132978

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER 1 Tanker	8. GALLONS 7,500	9. WASTE NAME Waste Solvent NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 31,500
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED M / D / Y 12/17/82

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Robert Frank</i>	25. NAME (Print) Robert Frank	26. Date Accepted M / D / Y 12/18/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. INDO16360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Edun Fee</i>	39. NAME (Print) EDUN FEE	40. Date Accepted M / D / Y 12/29/82	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 211 ET-50
GPH 12-29-82

005500

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 140431

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, Wisconsin 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 33,750
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED 3/3/83

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Bob Frank</i>	25. NAME (Print) Bob Frank	26. Date Accepted 3/3/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Bob Frank</i>	39. NAME (Print) Bob Frank	40. Date Accepted 3/3/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number

In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 E 7-50
GRM 3.3.83

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

REV. 6-81

MANIFEST NUMBER

A 140433

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals Corp		2. EPA IDENTIFICATION NO. WID023350102		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 33,750
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED 3/10/83

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Mr. Frank</i>	25. NAME (Print) Mr. Frank	26. Date Accepted 3/10/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>FDUNFEE</i>	39. NAME (Print) FDUNFEE	40. Date Accepted 3/10/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO210KT-50
GRM 3-10-83

A 140434

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 33,750
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heltzer</i>		16. NAME (Print) Robert Heltzer		17. DATE SHIPPED M D Y 3/24/83

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Michael M. Frank</i>	25. NAME (Print) Michael M. Frank	26. Date Accepted 3/22/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Frank</i>	39. NAME (Print) FRANK	40. Date Accepted 3/22/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0210 RT-50
GRW 3-22-83

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 140435

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION						
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS		
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue						
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051			6. TELEPHONE NUMBER (414) 252-3550			
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE
(1) Tanker	4,500	Waste Solvent NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	F003
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>	
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>	
14. SHIPPING WEIGHT (Pounds) 33,750						
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.			15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
					17. DATE SHIPPED M / D / Y 3/31/83	

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) WILLIAM A. FRANK	26. Date Accepted M / D / Y 3/31/83
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Rd		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) F. DUNN	40. Date Accepted M / D / Y 3/31/83
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210 RT-50
6/14 3/31/83

005500

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) - 252-3550					
7. NUMBER & TYPE OF CONTAINER (11) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 33,750
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED M D Y 2/28/83	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) - 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) Robert H. Frank	26. Date Accepted M D Y 2/28/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M D Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. INDO16360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) Bob Mauck	40. Date Accepted M D Y 2/28/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M D Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

70210 RT-50 GPM
2-28-83

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, Wisconsin 53051				6. TELEPHONE NUMBER (414-252-3550				
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	4,500	Waste Solvent NOS		Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	F003	33,750
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED M D Y 4/11/83

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) [Name]	26. Date Accepted 4/11/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) EDUN FEE	40. Date Accepted 4/11/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211KT-50
6M 4-11-83

MANIFEST NUMBER
A 140439

See reverse side, Copy 6, for instructions.
Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION							
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE
(1) Tanker	5,000	Waste Solvent NOS		Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	F003
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid	
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid	
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED M / D / Y 4/15/83	

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>Mike Garcia</i>	25. NAME (Print) Mike Garcia	26. Date Accepted 4/15/83
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>FDUN FEE</i>	39. NAME (Print) FDUN FEE	40. Date Accepted 4/15/83
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211K T-50
6PM 4/15/83

005500

MANIFEST NUMBER
A 140440

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051				6. TELEPHONE NUMBER (414) 252-3550				
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 5000	9. WASTE NAME Waste Solvent NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 37,500
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED 4/22/83

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) THOMAS D. FRANK	26. Date Accepted 4/22/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. INDO16360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) ED VINCE	40. Date Accepted 4/22/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY	
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HAZARDOUS WASTE FACILITY

To 211K T-50 GRM
4-22-83

005552

A 140442

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chem		2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobodink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE P003	14. SHIPPING WEIGHT (Pounds) 33,750
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Hertzner</i>		16. NAME (Print) Robert Hertzner	
						17. DATE SHIPPED M D Y 5 13 83	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) Donald Hertzner	26. Date Accepted 5 13 83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) FDONKEE	40. Date Accepted 5 13 83
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

TE FACILITY

TOXIC 155th 5-3-83

005501

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION							
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414-252-3550)					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 33,750
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>[Signature]</i>		16. NAME (Print) Harold A. [Name]	
						17. DATE SHIPPED M / D / Y 5/1/83	

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) M. Frank, Inc.	26. Date Accepted M / D / Y 5/1/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) EDUN FEE	40. Date Accepted M / D / Y 5/1/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY	
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HAZARDOUS WASTE FACILITY

TO 210K T-50
GRW 5/16-83

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66 REV. 6-81

MANIFEST NUMBER
A 140444

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051				6. TELEPHONE NUMBER (414) 252-3550				
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	4,500	Waste Solvent NOS		Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	F003	33,750
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer		17. DATE SHIPPED M D Y 5/24/83

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 5963377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Mr. Frank</i>	25. NAME (Print) Michael Martin	26. Date Accepted M D Y 5/24/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M D Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420* Sotuh Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Iddiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>FW</i>	39. NAME (Print) EDUNFEE	40. Date Accepted M D Y 5/24/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M D Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0210F T-50 6K14 5-24-83

005549

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals Corp		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414)-252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 5,000	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 35,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED M / D / Y 2/16/83	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. IND069505160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Robert Frank</i>	25. NAME (Print) Robert Frank	26. Date Accepted M / D / Y 2/16/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Bob Mauck</i>	39. NAME (Print) BOB MAUCK	40. Date Accepted M / D / Y 2/16/83	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210KT-50
GRM 2-16-83

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See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

REV. 6-81

A 116165

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	5,000	Waste Solvent NOS	Flammable Liquid	NA1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	F003	40,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED M / D / Y 1 / 15 / 84	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Bob Bridgewater</i>	25. NAME (Print) Bob Bridgewater	26. Date Accepted 1 / 15 / 84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. INDO16360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>	39. NAME (Print) Robert Heitzer	40. Date Accepted 1 / 15 / 84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 211 E 750
6PM 1.5.84

006324

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

REV. 6-81

A 116166

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	4,500	Waste Solvent NOS	Flammable Liquid	NA1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	F003	36,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heitzer</i>		16. NAME (Print) Robert Heitzer	
						17. DATE SHIPPED M / D / Y 1 12 84	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Michael L. Frank</i>	25. NAME (Print) Michael L. Frank	26. Date Accepted 1 12 84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. INDO16360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>R. Rushnok</i>	39. NAME (Print) R. Rushnok	40. Date Accepted 1 12 84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210E T-50
6/24 1-2684

006326

A 116167

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, Wisconsin 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 36,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heltzer</i>		16. NAME (Print) Robert Heltzer		17. DATE SHIPPED 2/18/84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) DOUGLAS H. DUFF	26. Date Accepted 2/18/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) BRUSHNICK	40. Date Accepted 2/18/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	
46. MAIL TO: Department of Natural Resources Bureau of Solid Waste Management Box 8094 Madison, Wisconsin 53708		47. Emergency 24 Hour Assistance Telephone Number In Wisconsin (608-266-3232) Outside Wisconsin (800-424-8802)	
FOR DNR USE ONLY			

HAZARDOUS WASTE FACILITY

TO 210 RT. 50
EPM 2-1-84

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

REV. 6-81

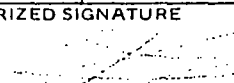
MANIFEST NUMBER

A 116168

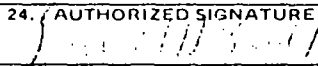
See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.


GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 5000	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 40,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE 		16. NAME (Print) R. L. Lachman	
						17. DATE SHIPPED M / D / Y 2/3/84	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE 	25. NAME (Print) R. L. Lachman	26. Date Accepted M / D / Y 2/3/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE 	39. NAME (Print) R. L. Lachman	40. Date Accepted M / D / Y 2/3/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	
46. MAIL TO: Department of Natural Resources Bureau of Solid Waste Management Box 8094 Madison, Wisconsin 53708		47. Emergency 24 Hour Assistance Telephone Number In Wisconsin (608-266-3232) Outside Wisconsin (800-424-8802)	
		FOR DNR USE ONLY	

HAZARDOUS WASTE FACILITY

TO 211E T-5061M
2 2 84

FOR DNR USE ONLY

A 116169

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME		2. EPA IDENTIFICATION NO.		3. COMMENTS/SPECIAL INSTRUCTIONS				
Milwaukee Solvents & Chemicals		WIDO23350192						
4. P.O. BOX OR STREET ADDRESS								
14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE				6. TELEPHONE NUMBER				
Menomonee Falls, WI 53051				(414) 252-3550				
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	4,500	Waste Solvent NOS		Flammable Liquid	NA1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	P003	36,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE		16. NAME (Print)		17. DATE SHIPPED M / D / Y
				Robert Heitzer		Robert Heitzer		2 / 16 / 84

TRANSPORTER SECTION		
18. COMPANY NAME		19. EPA IDENTIFICATION NO.
Mr. Frank, Inc.		ILDO69506160
20. P.O. BOX OR STREET ADDRESS		
201 West 155th Street		
21. CITY, STATE, ZIP CODE		22. TELEPHONE NUMBER
South Holland, Illinois 60473		(312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted M / D / Y
		2 / 16 / 84
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME		33. EPA IDENTIFICATION NO.
American Chemical		INDO16360265
34. P.O. BOX OR STREET ADDRESS		
420 South Colfax Road		
35. CITY, STATE, ZIP CODE		36. TELEPHONE NUMBER
Griffith, Indiana		(219) 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y
		2 / 18 / 84
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO211KT-50644
2.6.84

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM

Wisconsin Statutes 144

FORM 4400-66

REV. 6-81

A 116170

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 36,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>[Signature]</i>		16. NAME (Print) Robert J. [Signature]	
						17. DATE SHIPPED M / D / Y 2/15/84	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) C.E. MILBURN	26. Date Accepted 2/15/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) R. R. [Signature]	40. Date Accepted 2/15/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 2057 T-SD GEM
2-15-84

628900

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.


HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

REV. 6-81

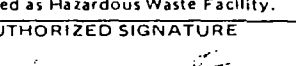
A 116171

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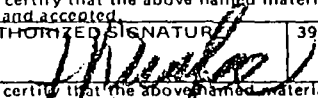
GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, Wisconsin 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Tanker	4,500	Waste Solvent NOS		Flammable Liquid	NA1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	F003	4,100
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE 		16. NAME (Print) Mr. Frank, Inc.		17. DATE SHIPPED M / D / Y 2-20-84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE 	25. NAME (Print) Mr. Frank, Inc.	26. Date Accepted M / D / Y 2-20-84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE 	39. NAME (Print) AMERICAN CHEMICAL	40. Date Accepted M / D / Y 2-20-84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 210 FT-50
GRW 2-20-84

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen -- press hard.

A 116172

GENERATOR (SHIPPER) SECTION			RECIPIENT(S)/SPECIAL INSTRUCTIONS		
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192			
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue					
5. CITY, STATE, ZIP CODE Wauwatosa Falls, WI 53051			6. TELEPHONE NUMBER (414) 252-3550		
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 1500	9. WASTE NAME Waste Solvent NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 2. Mixture <input checked="" type="checkbox"/> 3. Liquid
					13. US EPA WASTE CODE F003
					14. SHIPPING WEIGHT (Pounds) 1500
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.			15. AUTHORIZED SIGNATURE <i>[Signature]</i>		16. NAME (Print) Rob. L. L...
					17. DATE SHIPPED M / D / Y 12/1/87

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60480		22. TELEPHONE NUMBER (312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) FRANK, L...	26. Date Accepted 12/1/87
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER 219-924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) EDD NEFF	40. Date Accepted 12/4/87
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

006835

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 212 F T-50

A 116173

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

1. COMPANY NAME Milwaukee Solvents & Chemicals				2. EPA IDENTIFICATION NO. WID023350152		3. COMMENTS/SPECIAL INSTRUCTIONS	
4. P.O. BOX OR STREET ADDRESS 11755 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonie Falls, WI 53051				6. TELEPHONE NUMBER 414 752-3550			
7. NUMBER OF CONTAINERS	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Tanker	4500	Waste Solvent NOS	Flammable Liquid	NA1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	F003	116173
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
15. AUTHORIZED SIGNATURE <i>[Signature]</i>				16. NAME (Print) Robert L. Lister		17. DATE SHIPPED M / D / Y 11/15/81	

I hereby certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD009306160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) Frank, Inc.	26. Date Accepted 11/15/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. Date Accepted	

31. FACILITY NAME American Chemical		32. EPA IDENTIFICATION NO. IND016350265	
33. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
34. CITY, STATE, ZIP CODE Griffith, Indiana		35. TELEPHONE NUMBER 219 924-4370	
36. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
36. AUTHORIZED SIGNATURE <i>[Signature]</i>	37. NAME (Print) Frank, Inc.	38. Date Accepted 11/15/81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
39. ALTERNATE HAZARDOUS WASTE FACILITY		40. EPA IDENTIFICATION	
41. AUTHORIZED SIGNATURE		42. NAME (Print)	
43. Date Accepted		44. Date Accepted	

45. MAIL TO:
Department of Natural Resources
Solid Waste Division
P.O. Box 4394
Madison, Wisconsin 53703

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin: (608) 255-7222
Outside Wisconsin: (800) 442-7222

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

11/15/81

11/15/81

468880

A 116174

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen -- press hard.

GENERATOR (SHIPPER) SECTION			RECEIVER (FACILITY) SECTION				
1. COMPANY NAME Milwaukee Solvents & Chemicals			2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS		
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue							
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3350					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4500	9. WASTE NAME Waste Solvent	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER NA1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds)
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.			15. AUTHORIZED SIGNATURE <i>[Signature]</i>		16. NAME (Print) Robert J. [Name]		17. DATE SHIPPED M D Y 3/16/84

TRANSPORTER SECTION			HAZARDOUS WASTE FACILITY SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. WID023350192		20. COMMENTS	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street					
21. CITY, STATE, ZIP CODE South Holland, IL 60478		22. TELEPHONE NUMBER (708) 466-3377			
23. COMMENTS					
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) Frank, Inc.	26. DATE ACCEPTED 3/16/84			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
27. 2nd. TRANSPORTER COMPANY NAME			28. EPA IDENTIFICATION NO.		
29. AUTHORIZED SIGNATURE			30. NAME (Print)		

HAZARDOUS WASTE FACILITY SECTION		
31. FACILITY NAME American Chemical		32. EPA IDENTIFICATION NO. WID016360255
33. P.O. BOX OR STREET ADDRESS 420 South Colfax Road		
34. CITY, STATE, ZIP CODE Griffith, Indiana		35. TELEPHONE NUMBER (219) 824-1470
36. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
37. AUTHORIZED SIGNATURE <i>[Signature]</i>	38. NAME (Print) EDWARD [Name]	39. DATE ACCEPTED 3/16/84
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
40. ALTERNATE HAZARDOUS WASTE FACILITY NAME		41. EPA IDENTIFICATION NO.
42. AUTHORIZED SIGNATURE		43. NAME (Print)
44. MAIL TO: Department of Natural Resources Bureau of Solid Waste Management Box 8094 Madison, Wisconsin 53708		45. Emergency 24 Hour Assistance Telephone Number In Wisconsin (608) 265-3232 Outside Wisconsin (608) 428-5700
46. FOR DNR USE ONLY		

HAZARDOUS WASTE

A 116195

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION								
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS 14765 W. Bobolink Avenue								
5. CITY, STATE, ZIP CODE Menomonee Falls, WI 53051		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	2200	Waste Solvent NOS		Flammable Liquid	NA1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	F003	
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulation of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE		16. NAME (Print)		17. DATE SHIPPED M / D / Y
								1/12/84

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE	25. NAME (Print)	26. Date Accepted
<i>[Signature]</i>	D. Dunfee	1/12/84
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE		30. NAME (Print)
		31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Road			
35. CITY, STATE, ZIP CODE Griffith, Indiana		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted	
<i>[Signature]</i>	EDUNFEE	1/12/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 212KT-SD GRM 1/13/84

STATE OF WISCONSIN

Mail Copies To:

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Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

FOR DNR USE ONLY

Form 4400-66 Rev. 7-84
Chapter 144, Wis. Stats.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. WI 1002335019200001		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI						A. State Manifest Document Number WI 15451				
4. Generator's Phone (414) 252-3550 53051						B. State Generator's ID				
5. Transporter 1 Company Name Mr. Frank Inc.						C. State Transporter's ID 0079				
6. US EPA ID Number WI 10069506160						D. Transporter's Phone 312-596-3377				
7. Transporter 2 Company Name						E. State Transporter's ID				
8. US EPA ID Number						F. Transporter's Phone				
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319						G. State Facility's ID				
10. US EPA ID Number IND 016360265						H. Facility's Phone 219-924-4370				
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.		
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993				.1	T.T.	4500	G	F003		
b.				.	.	.	.
c.				.	.	.	.
d.				.	.	.	.
J. Additional Descriptions for Materials Listed Above WASTE SOLVENTS						K. Handling Codes for Wastes Listed Above				
15. Special Handling Instructions and Additional Information										
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.										
Printed/Typed Name Kirk K. Kretowski				Signature <i>Kirk K. Kretowski</i>				Date Month Day Year 07/25/84		
17. Transporter 1 Acknowledgement of Receipt of Materials				Printed/Typed Name MICHAEL MARTIN				Signature <i>Michael Martin</i>		Date Month Day Year 09/25/84
18. Transporter 2 Acknowledgement of Receipt of Materials				Printed/Typed Name				Signature		Date Month Day Year
19. Discrepancy Indication Space										
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.										
Printed/Typed Name FDUNFEZ				Signature <i>FDunfee</i>				Date Month Day Year 9/25/84		

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

210 FT-SU

11,100 BTU; 1.9% CL

COPY 4

Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
BSWM Copies 1 & 3 mail to above.

006870

STATE OF WISCONSIN

Mail Copies To:

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Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

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Form 4400-66 Rev. 7-84
Chapter 144, Wis. Stats.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. WI D 023-35019200-002		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals Corporation 14765 W. Bobolink Avenue Menomonee Falls, WI 53051 (414) 252-3550				A. State Manifest Document Number WI 15452			
5. Transporter 1 Company Name Mr. Frank, Inc.				B. State Generator's ID			
6. US EPA ID Number IL D 0.695-06160				C. State Transporter's ID			
7. Transporter 2 Company Name				D. Transporter's Phone 312-596-3377			
8. US EPA ID Number				E. State Transporter's ID			
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319				F. Transporter's Phone			
10. US EPA ID Number IND 016360265				G. State Facility's ID			
				H. Facility's Phone			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers No. Type		13. Total Quantity	14. Unit Wt/Vol
a. Waste Flammable Liquid NOS				.1 T T		5000	G
b. Flammable Liquid, UN1993							F003
c.							
d.							
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.							
Printed/Typed Name HAROLD A LANG				Signature <i>Harold A Lang</i>		Date Month Day Year 10/18/84	
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature <i>GARY DRUFEN</i>		Date Month Day Year 10/24/84	
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature		Date Month Day Year	
19. Discrepancy Indication Space NONE							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.				Signature <i>FDUNFEE</i>		Date Month Day Year 10/4/84	

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
BSWM Copies 1 & 3 mail to above.

- COPY 4 NIL CO.

006871

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Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

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Form 4400-66 Rev. 7-84
Chapter 134, Wis. Stats.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. WI ID 02-335-01-92 000093		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.			
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Ave - Menomonee Falls, WI 53051				A. State Manifest Document Number WI 15453					
4. Generator's Phone (414) 252-3550				B. State Generator's ID					
5. Transporter 1 Company Name Mr. Frank, Inc.				C. State Transporter's ID					
6. US EPA ID Number TI D 069 506 160				D. Transporter's Phone 312-596-3377					
7. Transporter 2 Company Name				E. State Transporter's ID					
8. US EPA ID Number				F. Transporter's Phone					
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319				G. State Facility's ID					
10. US EPA ID Number IND 016360265				H. Facility's Phone 219-924-4370					
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		1. Waste No.	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993		.1 T.T.		4500 G				F003	
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above					
15. Special Handling Instructions and Additional Information									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.									
Printed/Typed Name LARRY A. Dietrich				Signature <i>Larry A. Dietrich</i>				Date Month Day Year 10/1/84	
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature <i>Michael Martin</i>				Date Month Day Year 10/1/84	
Printed/Typed Name MICHAEL MARTIN				Signature				Date	
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature				Date	
Printed/Typed Name				Signature				Date	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name EDUNFEE				Signature <i>Edunfee</i>				Date Month Day Year 10/1/84	

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
BSWM Copies 1 & 3 mail to above.204K 10500 BTU
1.9 Y.C.
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006872

STATE OF WISCONSIN

Form 4400-66 Rev. 7-84
Chapter 144, Wis. Stats.

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Box 8094
Madison, Wisconsin 53708

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. WI D02335019200004	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Ave -Menomonee Falls, WI 53051			A. State Manifest Document Number WI 15454		B. State Generator's ID	
4. Generator's Phone (414) 252-3550		6. US EPA ID Number 12D089908180		C. State Transporter's ID 0079		D. Transporter's Phone 312-596-3377
5. Transporter 1 Company Name Mr. Frank, Inc.		8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone
7. Transporter 2 Company Name		10. US EPA ID Number IND016360265		G. State Facility's ID 9180890002		H. Facility's Phone 219-924-4370
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319		11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
a.		b.		c.	d.	e.
Waste Flammable Liquid NOS Flammable Liquid, UN1993		001		T	T	04500 G
b.		c.		d.	e.	f.
c.		d.		e.	f.	g.
d.		e.		f.	g.	h.
J. Additional Descriptions for Materials Listed Above 14 WASTE SOLVENTS				K. Handling Codes for Wastes Listed Above		
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.						
Printed/Typed Name LARRY Allan Dietrich		Signature <i>Larry Allan Dietrich</i>		Date Month Day Year 10/30/84		
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature <i>John Van Dyke</i>		Date Month Day Year 10/30/84		
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Date Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name EDUNFER		Signature <i>Edunfer</i>		Date Month Day Year 10/30/84		

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
BSWM Copies 1 & 3 mail to above.

COPY 4

006873

STATE OF WISCONSIN

Form 4400-66 Rev. 7-84
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Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W I D 0 2 3 3 5 0 1 9 2 0 0 0 6		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051				A. State Manifest Document Number WI 15456			
4. Generator's Phone (414) 252-3550				B. State Generator's ID			
5. Transporter 1 Company Name Mr. Frank, Inc.				C. State Transporter's ID			
6. US EPA ID Number I E D 0 6 9 5 0 6 1 6 0				D. Transporter's Phone 312-596-3377			
7. Transporter 2 Company Name				E. State Transporter's ID			
8. US EPA ID Number				F. Transporter's Phone			
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319				G. State Facility's ID			
10. US EPA ID Number I N D 0 1 6 3 6 0 2 6 5				H. Facility's Phone 219-924-4370			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers No.		13. Total Quantity	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993				. 1		T T 04/300 G	
b.				.		.	
c.				.		.	
d.				.		.	
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.							
Printed/Typed Name Larry Allen Dietrich				Signature <i>Larry Allen Dietrich</i>		Date Month Day Year 1.12.88	
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature <i>Michael Martin</i>		Date Month Day Year 1.12.88	
Printed/Typed Name Michael Martin				Signature		Date	
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature		Date	
Printed/Typed Name				Signature		Date	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name FDUNFEE				Signature <i>719 unfee</i>		Date Month Day Year 1.12.88	

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)TO 211R 7-50 10700 BIV
37.c.

COPY 4

Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
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006874

STATE OF WISCONSIN

Form 4400-66 Rev. 7-84
Chapter 144, Wis. Stats.

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Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. WI DQ 2335019200005		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue- Menomonee Falls, WI		4. Generator's Phone (414) 252-3550		5. Transporter 1 Company Name Mr. Frank, Inc.		6. US EPA ID Number WI DQ 69505160		7. Transporter 2 Company Name	
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319		10. US EPA ID Number INDQ 16360265		C. State Transporter's ID 0079		D. Transporter's Phone 312-596-3377		E. State Transporter's ID	
				F. Transporter's Phone		G. State Facility's ID		H. Facility's Phone 219-924-4370	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993		001. T.T		04.500		G		F003	
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above 67								K. Handling Codes for Wastes Listed Above	
15. Special Handling Instructions and Additional Information									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.									
Printed/Typed Name Larry Allen Dietrich		Signature <i>Larry Allen Dietrich</i>		Date 11/07/84		Month		Day Year	
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name John Van Dyke		Signature <i>John Van Dyke</i>		Date 11/07/84		Month Day Year	
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature		Date		Month Day Year	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name F DUNFEE		Signature <i>F Dunfee</i>		Date 11/17/84		Month		Day Year	

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)21K
11300 BTU 237.00 T-50

COPY 4

Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
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006875

STATE OF WISCONSIN

Form 4400-66 Rev. 7-84
Chapter 144, Wis. Stats.

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Madison, Wisconsin 53708

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W I D O 2 3 3 5 0 1 9 2 0 0 0 0 7		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 15457							
4. Generator's Phone (414) 252-3550						B. State Generator's ID							
5. Transporter 1 Company Name Mr. Frank, Inc.						C. State Transporter's ID 0079							
6. US EPA ID Number W I D O 6 9 5 0 6 1 6 0						D. Transporter's Phone 312-596-3377							
7. Transporter 2 Company Name						E. State Transporter's ID							
8. US EPA ID Number						F. Transporter's Phone							
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319						G. State Facility's ID 9180890002							
10. US EPA ID Number END O 1 6 3 6 0 2 6 5						H. Facility's Phone 219-924-4370							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. Waste Flammable Liquid NOS						1		TT		04500 G		D001	
X Flammable Liquid, UN1993						
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.													
Printed/Typed Name Larry Allan Detrick						Signature <i>Larry Allan Detrick</i>		Date 1.20.584		Month Day Year			
17. Transporter 1 Acknowledgement of Receipt of Materials						Signature <i>Michael Martin</i>		Date 1.20.584		Month Day Year			
Printed/Typed Name Michael Martin						Signature		Date		Month Day Year			
18. Transporter 2 Acknowledgement of Receipt of Materials						Signature		Date 1.20.584		Month Day Year			
Printed/Typed Name F						Signature		Date		Month Day Year			
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name FDUNFEET						Signature <i>FDunfee</i>		Date 1.20.584		Month Day Year			

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

212 K T-50

9800 BTU

Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
27.0. BSWM Copies 1 & 3 mail to above.

COPY 4

006876

STATE OF WISCONSIN

Mail Copies To:

State of Wisconsin
Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

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Form 4400-86 Rev. 7-84
Chapter 144, Wis. Stats.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051		W I D O 2 3 3 5 0 1 9 2 0 0 0 0 8		A. State Manifest Document Number WI 15458		
4. Generator's Phone (414) 252-3550		6. US EPA ID Number		C. State Transporter's ID 0079		
5. Transporter 1 Company Name Mr. Frank, Inc.		7. Transporter 2 Company Name		D. Transporter's Phone 312-596-3377		
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319		10. US EPA ID Number I N D O 1 6 3 6 0 2 6 5		E. State Transporter's ID		
				F. Transporter's Phone		
				G. State Facility's ID		
				H. Facility's Phone 219-924-4370		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993		.1	TT	4.400	G	D001
b.		.	.	.	.	.
c.		.	.	.	.	.
d.		.	.	.	.	.
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above				
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.						
Printed/Typed Name Larry Allan Dietrich		Signature <i>Larry Allan Dietrich</i>		Date Month Day Year 1.2.1.984		
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature <i>David W. Bogda</i>		Date Month Day Year 1.2.1.984		
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Date Month Day Year 1.2.1.984		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name DUNFEE		Signature <i>Dunfee</i>		Date Month Day Year 1.2.1.984		

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. WI D O 2 3 3 5 0 1 9 2 0 0 0 0 9		Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051					A. State Manifest Document Number WI 15459			
4. Generator's Phone ()					B. State Generator's ID			
5. Transporter 1 Company Name Mr. Frank, Inc.					C. State Transporter's ID 0079			
6. US EPA ID Number I L D O 6 9 5 0 6 1 6 0					D. Transporter's Phone 312-596-3377			
7. Transporter 2 Company Name					E. State Transporter's ID			
8. US EPA ID Number					F. Transporter's Phone			
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319					G. State Facility's ID			
10. US EPA ID Number I N D O 1 6 3 6 0 2 6 5					H. Facility's Phone 219-924-4370			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993				1	TT	04.600	G	D001
b.								
c.								
d.								
J. Additional Descriptions for Materials Listed Above					K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information								
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.								
Printed/Typed Name LARRY Allan Dietrich					Signature <i>Larry Allan Dietrich</i>		Date Month Day Year 1.2.2884	
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials					Date		
	Printed/Typed Name MICHAEL A. PEIFER					Signature <i>Michael A. Peifer</i>		Month Day Year 1.2.2884
	18. Transporter 2 Acknowledgement of Receipt of Materials					Date		
Printed/Typed Name					Signature		Month Day Year	
FACILITY	19. Discrepancy Indication Space							
	20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
	Printed/Typed Name HUNTER					Signature <i>HD Hunter</i>		Date Month Day Year 1.2.2884

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37.0

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. WI D O 2 3 3 5 0 1 9 2 0 0 0 1 0		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051				A. State Manifest Document Number WI 15460		B. State Generator's ID	
4. Generator's Phone (414) 252-3550				6. US EPA ID Number WI D O 6 9 5 0 6 1 6 0		C. State Transporter's ID 0079	
5. Transporter 1 Company Name Mr. Frank, Inc.				8. US EPA ID Number ...		D. Transporter's Phone 312-596-3377	
7. Transporter 2 Company Name ...				E. State Transporter's ID ...		F. Transporter's Phone ...	
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319				10. US EPA ID Number IND O 1 6 3 6 0 2 6 5		G. State Facility's ID ...	
				H. Facility's Phone 219-924-4370			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993		01	TT	04500	G	D001	
b.		...	...	...	...	...
c.		...	...	...	...	...
d.		...	...	...	...	...
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.							
Printed/Typed Name LARRY A Dietrich				Signature <i>Larry A Dietrich</i>		Date Month Day Year 01/1/85	
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature <i>John Van Vlymen</i>		Date Month Day Year 01/1/85	
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature <i>...</i>		Date Month Day Year ...	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name EDUNTEE				Signature <i>EDUNTEE</i>		Date Month Day Year 1/1/85	

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W. I. D. O. 2.3.3.5.0.1.9.2		Manifest Document No. 0.0.0.5.6		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Ave. Menomonee Falls, WI 53051						A. State Manifest Document Number WI 16556							
4. Generator's Phone (414) 252-3550						B. State Generator's ID							
5. Transporter 1 Company Name Mr. Frank, Inc.						C. State Transporter's ID							
6. US EPA ID Number I. L. D. O. 6.9.5.0.6.1.6.0						D. Transporter's Phone 312-596-3377							
7. Transporter 2 Company Name						E. State Transporter's ID							
8. US EPA ID Number						F. Transporter's Phone							
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319						G. State Facility's ID							
10. US EPA ID Number I. N. D. O. 1.6.3.6.0.2.6.5						H. Facility's Phone 219-924-4370							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. <input checked="" type="checkbox"/> Waste Flammable Liquid NOS Flammable Liquid, UN1993						0.0.1 T.T.		50.66 G				D001	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.													
Printed/Typed Name ALAN L. LEAL										Signature <i>[Signature]</i>		Date 01/15/85	
17. Transporter 1 Acknowledgement of Receipt of Materials										Signature <i>[Signature]</i>		Date 01/15/85	
18. Transporter 2 Acknowledgement of Receipt of Materials										Signature <i>[Signature]</i>		Date 01/15/85	
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19													
Printed/Typed Name ED PUNFEE										Signature <i>[Signature]</i>		Date 1/15/85	

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Outside Wisconsin (800-424-8802)

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W. I. D. O. 2.3.3.5.0.1.9.2		Manifest Document No. 0.0.0.5.7		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Ave. Menomonsee Falls, WI 53051						A. State Manifest Document Number WI 16557							
4. Generator's Phone (414) 252-3550						B. State Generator's ID							
5. Transporter 1 Company Name Mr. Frank, Inc.						C. State Transporter's ID							
6. US EPA ID Number I. L. D. 0.6.9.5.0.6.1.6.0						D. Transporter's Phone 312-396-3377							
7. Transporter 2 Company Name						E. State Transporter's ID							
8. US EPA ID Number						F. Transporter's Phone							
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319						G. State Facility's ID							
10. US EPA ID Number I. N. D. 0.1.6.3.6.0.2.6.5						H. Facility's Phone 219-924-4370							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		1. Waste No.	
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID, UN1993						0.0.1 T T		1.70.50.00 G				D001	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.													
Printed/Typed Name Larry Allan Dietrich										Signature <i>Larry Allan Dietrich</i>		Date Month Day Year 01/29/85	
17. Transporter 1 Acknowledgement of Receipt of Materials										Signature <i>David V...</i>		Date Month Day Year 01/29/85	
18. Transporter 2 Acknowledgement of Receipt of Materials										Signature		Date Month Day Year	
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name <i>R. R. R...</i>										Signature <i>R. R. R...</i>		Date Month Day Year 01/29/85	

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11,100 BTU
3.6% CO

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. WI D Q 2 3 3 5 0 1 9 2		Manifest Document No. Q Q Q 5 8		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Ave. Menomonee Falls, WI 53051						A. State Manifest Document Number WI 16558							
4. Generator's Phone (414) 252-3550						B. State Generator's ID							
5. Transporter 1 Company Name Mr. Frank, Inc.						C. State Transporter's ID							
6. US EPA ID Number I L D Q 6 9 5 0 6 1 6 0						D. Transporter's Phone 21 312-596-3377							
7. Transporter 2 Company Name						E. State Transporter's ID							
8. US EPA ID Number						F. Transporter's Phone							
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319						G. State Facility's ID							
10. US EPA ID Number I N D Q 1 6 3 6 0 2 6 5						H. Facility's Phone 219-924-4370							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		I. Waste No.	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993						Q 0 1 T T		04.500		G		D001	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information													
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Printed/Typed Name <i>Harold A. LANE</i>						Signature <i>Harold A. Lane</i>						Date Month Day Year 02 12 85	
17. Transporter 1 Acknowledgement of Receipt of Materials						Signature <i>Michael Martin</i>						Date Month Day Year 02 12 85	
Printed/Typed Name <i>Michael Martin</i>						Signature						Date Month Day Year 02 12 85	
18. Transporter 2 Acknowledgement of Receipt of Materials						Signature						Date Month Day Year 02 12 85	
Printed/Typed Name						Signature						Date Month Day Year 02 12 85	
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name <i>R. Ruskow</i>						Signature <i>R. Ruskow</i>						Date Month Day Year 02 12 85	

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
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10,800 BTU
28% CB

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US FPA ID No. W.I.D.O. 2.3.3.5.0.1.9.2		Manifest Document No. 000059		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 16559							
4. Generator's Phone (414) 252-3550						B. State Generator's ID							
5. Transporter 1 Company Name Mr. Frank, Inc.						C. State Transporter's ID 0079							
6. US EPA ID Number I.L.D.O. 6.9.5.0.6.1.6.0						D. Transporter's Phone 312-596-3377							
7. Transporter 2 Company Name						E. State Transporter's ID							
8. US EPA ID Number						F. Transporter's Phone							
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319						G. State Facility's ID 9180890002							
10. US EPA ID Number I.N.D.O. 1.6.3.6.0.2.6.5						H. Facility's Phone 219-924-4370							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993						0.01 T.T.		04.5.00		G		D001	
b.						.		.		.		.
c.						.		.		.		.
d.						.		.		.		.
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.													
Printed/Typed Name LARRY ALAN DIETRICH										Signature <i>Larry Alan Dietrich</i>		Date 11.2.29.85	
17. Transporter 1 Acknowledgement of Receipt of Materials										Signature <i>John Van Wyne</i>		Date 02.2.85	
18. Transporter 2 Acknowledgement of Receipt of Materials										Signature		Date	
19. Discrepancy Indication Space										Signature		Date	
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.										Signature <i>GK Murphy</i>		Date 2.20.84	

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. WI 140.2.3.3.5.0.1.9.2		Manifest Document No. 000060		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 16560							
4. Generator's Phone (414) 252-3550						B. State Generator's ID							
5. Transporter 1 Company Name Mr. Frank, Inc.				6. US EPA ID Number ILD069506160		C. State Transporter's ID 0079							
7. Transporter 2 Company Name						D. Transporter's Phone 312-596-3377							
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, IN. 46319						E. State Transporter's ID							
10. US EPA ID Number IND016360265						F. Transporter's Phone							
						G. State Facility's ID							
						H. Facility's Phone 219-924-4370							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993						0 0.1 T T		04.500		G		D001	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information													
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Printed/Typed Name LARRY A Dietrich										Signature <i>Larry A Dietrich</i>		Date Month Day Year 03 05 85	
17. Transporter 1 Acknowledgement of Receipt of Materials										Date			
Printed/Typed Name DAVID W. Bogdan										Signature <i>DW Bogdan</i>		Month Day Year 03 05 85	
18. Transporter 2 Acknowledgement of Receipt of Materials										Date			
Printed/Typed Name										Signature		Month Day Year	
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name EDUNFEE										Signature <i>Edunfee</i>		Date Month Day Year 3 5 85	

Emergency 24 Hour Assistance Telephone Number
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3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 16561			
4. Generator's Phone (414) 252-3550						B. State Generator's ID			
5. Transporter 1 Company Name Mr. Frank, Inc.						C. State Transporter's ID 071			
7. Transporter 2 Company Name						D. Transporter's Phone 312-596-3377			
8. US EPA ID Number						E. State Transporter's ID			
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, IN 46319						F. Transporter's Phone			
10. US EPA ID Number I N D O 1 6 3 6 0 2 6 5						G. State Facility's ID			
H. Facility's Phone 219-924-4370									
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers		13. Total		14. Unit	
				No. Type		Quantity		Wt/Vol	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993				0 0 1 T T		04500 G		D001	
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information									
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Printed/Typed Name Larry Allan Dietrich						Signature <i>Larry Allan Dietrich</i>		Date Month Day Year 03 20 85	
17. Transporter 1 Acknowledgement of Receipt of Materials						Date			
Printed/Typed Name Robert W. Prosser						Signature <i>Robert W. Prosser</i>		Month Day Year 7 3 20 85	
18. Transporter 2 Acknowledgement of Receipt of Materials						Date			
Printed/Typed Name						Signature		Month Day Year	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name F DUNFEE						Signature <i>FD Dunfee</i>		Date Month Day Year 3 20 85	

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
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211E T-50

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W I D O 2 3 3 5 0 1 9 2		Manifest Document No. 0 0 0 6 2		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 16562							
4. Generator's Phone (414) 252-3550						B. State Generator's ID							
5. Transporter 1 Company Name Mr. Frank, Inc.						C. State Transporter's ID 0029							
7. Transporter 2 Company Name						D. Transporter's Phone 312-596-3377							
6. US EPA ID Number I L D O 6 9 5 0 6 1 6 0						E. State Transporter's ID							
8. US EPA ID Number						F. Transporter's Phone							
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319						G. State Facility's ID							
10. US EPA ID Number I N D O 1 6 3 6 0 2 6 5						H. Facility's Phone 219-924-4370							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993						0.01 T.T.		04.500		G		D001	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.													
Printed/Typed Name LARRY Allan Dietrich										Signature <i>Larry Allan Dietrich</i>		Date Month Day Year 03 27 85	
17. Transporter 1 Acknowledgement of Receipt of Materials										Signature <i>Michael J. ...</i>		Date Month Day Year 03 27 85	
18. Transporter 2 Acknowledgement of Receipt of Materials										Signature		Date Month Day Year	
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous material covered by this manifest except as noted in Item 19.													
Printed/Typed Name EDUN FEE										Signature <i>Frank</i>		Date Month Day Year 03 27 85	

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
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Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

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Chapter 144, Wis. Stats.

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W L D O 2 3 3 5 0 1 9 2		Manifest Document No. Q Q O 6 3		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 16563							
4. Generator's Phone (414) 252-3550						B. State Generator's ID							
5. Transporter 1 Company Name Mr. Frank, Inc.						C. State Transporter's ID 0079							
6. US EPA ID Number I L D O 6 9 5 0 6 1 6 0						D. Transporter's Phone 312-596-3377							
7. Transporter 2 Company Name						E. State Transporter's ID							
8. US EPA ID Number						F. Transporter's Phone							
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319						G. State Facility's ID							
10. US EPA ID Number I N D O 1 6 3 6 0 2 6 5						H. Facility's Phone 219-924-4370							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No.		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993						0 0 1		T T		0 4 2 0 0		G D001	
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.													
Printed/Typed Name LARRY Allan Dietrich						Signature <i>Larry Allan Dietrich</i>		Date Month Day Year 07 03 85					
17. Transporter 1 Acknowledgement of Receipt of Materials						Signature <i>John Van Vleet</i>		Date Month Day Year 04 03 85					
18. Transporter 2 Acknowledgement of Receipt of Materials						Signature		Date Month Day Year					
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name FD UN FEE						Signature <i>FD Unfee</i>		Date Month Day Year 4 3 85					

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W L D O 2 3 3 5 0 1 9 2		Manifest Document No. Q Q D 6 4		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 16564			
4. Generator's Phone (414) 252-3550						B. State Generator's ID			
5. Transporter 1 Company Name Mr. Frank, Inc.				6. US EPA ID Number L L D O 6 9 5 0 6 1 6 0		C. State Transporter's ID 0079			
7. Transporter 2 Company Name				8. US EPA ID Number		D. Transporter's Phone 312-596-3377			
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319						E. State Transporter's ID			
10. US EPA ID Number I N D O 1 6 3 6 0 2 6 5						F. Transporter's Phone			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993						0 0 1 T T		04.500 G	
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.									
Printed/Typed Name LARRY Allen Dietrich						Signature <i>Larry Allen Dietrich</i>		Date Month Day Year 05 07 85	
17. Transporter 1 Acknowledgement of Receipt of Materials						Signature <i>John Van Vliet</i>		Date Month Day Year 05 07 85	
18. Transporter 2 Acknowledgement of Receipt of Materials						Signature		Date Month Day Year	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name EDUN FEE						Signature <i>Edun Fee</i>		Date Month Day Year 5 7 85	

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

10500 BTU
8% CP.

210 K T-50

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3 - Transporter 6 - Transporter
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UNIFORM HAZARDOUS
WASTE MANIFEST1. Generator's USE
W.I.D.O.2.3.3

3. Generator's Name and Mailing Address

Milwaukee Solvents & Chemicals
14765 W. Bobolink Avenue - Menomone

4. Generator's Phone (414) 252-3350

5. Transporter 1 Company Name

Mr. Frank, Inc.

7. Transporter 2 Company Name

9. Designated Facility Name and Site Address

American Chemical Service Inc.
420 South Colfax
Griffith, Indiana 46319

10. US EPA ID Number

I.N.D.O.1-6-3-6-0-2-6-5

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

a. Waste Flammable Liquid NOS
Flammable Liquid, UN199312. Containers
No. Type13. Total
Quantity14. Unit
Wt/Vol

1. Waste No.

0-0-1 T-T 04.200 G D001

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.

Printed/Typed Name

LARRY A. DIETRICH

Signature

Larry Allen Dietrich

Date

Month Day Year
05 29 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

CARL E. MILGROM

Signature

Carl E. Milgrom

Date

Month Day Year
05 29 85

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year
. . .

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

ED V N FEE

Signature

Ed V N Fee

Date

Month Day Year
5 29 85Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
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Madison, Wisconsin 53708Form 4400-66 Rev. 7-84
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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W.T.D.O.2.3.3.5.0.1.9.2		Manifest Document No. 0.0.1.0.1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.			
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 28301					
4. Generator's Phone (414) 252-3550						B. State Generator's ID					
5. Transporter 1 Company Name Mr. Frank, Inc						C. State Transporter's ID 0079					
6. US EPA ID Number I.L.D.O.6.9.5.0.6.1.6.0						D. Transporter's Phone 312-596-3377					
7. Transporter 2 Company Name						E. State Transporter's ID					
8. US EPA ID Number						F. Transporter's Phone					
9. Designated Facility Name and Site Address American Chemical Service Inc 420 South Colfax Griffith, Indiana 46319						10. US EPA ID Number IND081636.5/6.5.					
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	
a. Waste Flammable Liquid NOS Flammable Liquid, UN 1993						0.0.1 T-T		04.50.0	G	D001	
b.						..		..
c.						..		..
d.						..		..
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above					
15. Special Handling Instructions and Additional Information											
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.											
Printed/Typed Name LARRY A DIETRICH						Signature <i>Larry A Dietrich</i>			Date Month Day Year 6/6/85		
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name MICHAEL MARTIN			Signature <i>Michael Martin</i>		Date Month Day Year 6/6/85
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name			Signature		Date Month Day Year
19. Discrepancy Indication Space											
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.											
Printed/Typed Name EDVINEE						Signature <i>Edvinee</i>			Date Month Day Year 6/6/85		

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W.I.D.O.2.3.3.5.0.1.9.2		Manifest Document No. 0.0.1.0.2		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 28302							
						B. State Generator's ID							
4. Generator's Phone (414) 252-3550						C. State Transporter's ID							
5. Transporter 1 Company Name Mr. Frank, Inc						D. Transporter's Phone 312-596-3377							
7. Transporter 2 Company Name						E. State Transporter's ID							
8. US EPA ID Number						F. Transporter's Phone							
9. Designated Facility Name and Site Address American Chemical Service Inc 420 South Colfax Griffith, Indiana 46319						10. US EPA ID Number I.N.D.O.1.6.3.6.0.2.6.5							
						G. State Facility's ID							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) a. Waste Flammable Liquid NOS Flammable Liquid, UN1993						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		I. Waste No.	
						0 0 1 T T		04500		G		D001	
b.						.....		.....		.....		.....
c.						.....		.....		.....		.....
d.						.....		.....		.....		.....
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information													
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Printed/Typed Name LARRY A DIETRICH										Signature <i>Larry Allen Dietrich</i>		Date 06/14/85	
17. Transporter 1 Acknowledgement of Receipt of Materials										Signature <i>Mr. C. W. ...</i>		Date 06/14/85	
18. Transporter 2 Acknowledgement of Receipt of Materials										Signature		Date	
19. Discrepancy Indication Space										Month Day Year		.....
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name EDUNFEE										Signature <i>Edunfee</i>		Date 6/14/85	

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

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Chapter 144, Wis. Stats.

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W.I.D.O.2.3.3.5.0.1.9.2		Manifest Document No. 0.0.1.0.3		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 28303							
						B. State Generator's ID							
4. Generator's Phone (414) 252-3550						C. State Transporter's ID 0079							
5. Transporter 1 Company Name Mr. Frank, Inc.						D. Transporter's Phone 312-596-3377							
7. Transporter 2 Company Name						E. State Transporter's ID							
						F. Transporter's Phone							
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319						G. State Facility's ID 9180890002							
10. US EPA ID Number I.N.D.O.1.6.3.6.0.2.6.5						H. Facility's Phone 219-924-4370							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) a. Waste Flammable Liquid NOS Flammable Liquid, UN1993						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		I. Waste No.	
						0 0 1 T-T		05000 G		D001			
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information													
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Printed/Typed Name KOREN J. LINDENBERG						Signature <i>[Signature]</i>				Date Month Day Year 06/28/85			
17. Transporter 1 Acknowledgement of Receipt of Materials													
Printed/Typed Name John Van Vlymen						Signature <i>[Signature]</i>				Date Month Day Year 06/28/85			
18. Transporter 2 Acknowledgement of Receipt of Materials													
Printed/Typed Name						Signature				Date Month Day Year . . .			
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name F D U N F E E						Signature <i>[Signature]</i>				Date Month Day Year 6/28/85			

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

Distribution: 1 - BSWM 4 - Facility
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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W-I-D-O-2-3-3-5-0-1-9-2		Manifest Document No. 0-0-1-0-4		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.							
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolind Avenue - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 28304									
4. Generator's Phone (414) 252-3550						B. State Generator's ID									
5. Transporter 1 Company Name Mr. Frank, Inc						C. State Transporter's ID 0019									
6. US EPA ID Number I-L-D-O-6-9-5-0-6-1-6-0						D. Transporter's Phone 312-536-3377									
7. Transporter 2 Company Name						E. State Transporter's ID									
8. US EPA ID Number						F. Transporter's Phone									
9. Designated Facility Name and Site Address American Chemical Service Inc 420 South Colfax Griffith, Indiana 46319						G. State Facility's ID									
10. US EPA ID Number I-N-D-O-1-6-3-6-0-2-6-5						H. Facility's Phone 219-924-4370									
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.			
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993						0-0-1 T-T		14.250		G		D001			
b.												
c.												
d.												
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above									
15. Special Handling Instructions and Additional Information															
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.															
Printed/Typed Name Robert J. L...						Signature [Signature]						Date Month Day Year 11/1/85			
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name [Name]						Signature [Signature]		Date Month Day Year 11/1/85	
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name [Name]						Signature [Signature]		Date Month Day Year	
19. Discrepancy Indication Space															
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.															
Printed/Typed Name EDUNFEE						Signature [Signature]						Date Month Day Year 7/1/85			

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
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Chapter 144, Wis. Stats.

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. WI D O 2 3 3 5 0 1 9 2 0 0 1 0 5		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Boboling Avenue - Menomonee Falls, WI 53051		6. US EPA ID Number I. L. D. O. 6. 9. 5. 0. 6. 1. 6. 0		A. State Manifest Document Number WI 28305		B. State Generator's ID	
4. Generator's Phone (414) 251-3550		8. US EPA ID Number		C. State Transporter's ID 11179		D. Transporter's Phone 312-596-3377	
5. Transporter 1 Company Name Mr. Frank, Inc.		10. US EPA ID Number I. N. D. O. 1. 6. 3. 6. 0. 2. 6. 5		E. State Transporter's ID		F. Transporter's Phone	
7. Transporter 2 Company Name		12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol	
9. Designated Facility Name and Site Address American Chemical Service Inc 420 South Colfax Griffith, Indiana 46319		15. Special Handling Instructions and Additional Information		K. Handling Codes for Wastes Listed Above			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) a. Waste Flammable Liquid NOS Flammable Liquid, UN1993		12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol	
b.		12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol	
c.		12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol	
d.		12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.		17. Transporter 1 Acknowledgement of Receipt of Materials		18. Transporter 2 Acknowledgement of Receipt of Materials		19. Discrepancy Indication Space	
Printed/Typed Name David J. L...		Signature [Signature]		Signature [Signature]		Date 10/1/85	
Printed/Typed Name KON B...		Signature [Signature]		Signature [Signature]		Date 10/1/85	
Printed/Typed Name [Signature]		Signature [Signature]		Signature [Signature]		Date 10/1/85	
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.		Printed/Typed Name [Signature]		Signature [Signature]		Date 10/1/85	

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)Distribution: 1 - BSWM
2 - Generator
3 - BSWM
4 - Facility
5 - Generator
6 - Transporter

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Chapter 144, Wis. Stats.

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W-I-D-O-2-3-3-5-0-1-9-2-0-0-1-0-6		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051				4. Generator's Phone (414) 252-3550		A. State Manifest Document Number WI 28306		B. State Generator's ID	
5. Transporter 1 Company Name Mr. Frank, Inc				6. US EPA ID Number I-L-D-0-6-9-5-0-6-1-6-0		C. State Transporter's ID		D. Transporter's Phone 312-596-3377	
7. Transporter 2 Company Name				8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone	
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319				10. US EPA ID Number I-N-D-O-1-6-3-6-0-2-6-5		G. State Facility's ID		H. Facility's Phone 219-924-4370	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993				0 0 1 T T		04500		G	
b.				...		...		...
c.				...		...		...
d.				...		...		...
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above					
15. Special Handling Instructions and Additional Information									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.									
Printed/Typed Name <i>[Signature]</i>				Signature <i>[Signature]</i>				Date Month Day Year <i>8/12/85</i>	
17. Transporter 1 Acknowledgement of Receipt of Materials									
Printed/Typed Name <i>[Signature]</i>				Signature <i>[Signature]</i>				Date Month Day Year <i>8/12/85</i>	
18. Transporter 2 Acknowledgement of Receipt of Materials									
Printed/Typed Name				Signature				Date Month Day Year	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name EDUNFEE				Signature <i>[Signature]</i>				Date Month Day Year <i>8/12/85</i>	

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
BSWM Copies 1 & 3 mail to above.

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211E T-50
15100 BTU
3.2 % CD.

008960

STATE OF WISCONSIN

Mail Copies To:

State of Wisconsin
Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

FOR DNR USE ONLY

Form 4400-66 Rev. 7-84
Chapter 144, Wis. Stats.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. WI D O 2 3 3 5 0 1 9 2 0 0 1 0 7		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051				A. State Manifest Document Number WI 28307			
4. Generator's Phone (414) 252-3550				B. State Generator's ID			
5. Transporter 1 Company Name Mr. Frank, Inc				C. State Transporter's ID 0019			
6. US EPA ID Number WI D O 6 9 5 0 6 1 6 0				D. Transporter's Phone 312-596-3377			
7. Transporter 2 Company Name				E. State Transporter's ID			
8. US EPA ID Number				F. Transporter's Phone			
9. Designated Facility Name and Site Address American Chemical Liquid NOS 420 South Colfax Griffith, Indiana 46319				G. State Facility's ID			
10. US EPA ID Number IND O 1 6 3 6 0 2 6 5				H. Facility's Phone 219-924-4370			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993		0.0.1	T.T	4.2.0.1	G	D001	
b.							
c.							
d.							
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.							
Printed/Typed Name Robert T. L...				Signature [Signature]		Date 12/1/85	
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature [Signature]		Date 12/1/85	
Printed/Typed Name John Van Dyke				Signature [Signature]		Date 12/1/85	
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature [Signature]		Date 12/1/85	
Printed/Typed Name				Signature		Date	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name FD Unfee				Signature FD UNFEE		Date 8/19/85	

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

210 E. T-50

12200 BTU

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Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
BSWM Copies 1 & 3 mail to above.

008961

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W.I.D.O.2.3.3.5.0.1.9.2	Manifest Document No. 0.0.1.0.8	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051				A. State Manifest Document Number WI 28308		
4. Generator's Phone (414) 252-3550				B. State Generator's ID		
5. Transporter 1 Company Name Mr. Frank, Inc.				C. State Transporter's ID 0079		
6. US EPA ID Number I.L.D.0.6.9.5.0.6.1.6.0				D. Transporter's Phone 312-596-3377		
7. Transporter 2 Company Name				E. State Transporter's ID		
8. US EPA ID Number				F. Transporter's Phone		
9. Designated Facility Name and Site Address American Chemical Service Inc 420 South Colfax Griffith, Indiana 46319				G. State Facility's ID		
10. US EPA ID Number I.N.D.0.1.6.3.6.0.2.6.5				H. Facility's Phone 219-924-4370		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993		0.01	T.T.	150.00	G	D001
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.						
Printed/Typed Name Robert J. Lindquist				Signature <i>[Signature]</i>		Date Month Day Year 11/13/85
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name John V. Lindquist				Signature <i>[Signature]</i>		Date Month Day Year 11/13/85
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name				Signature		Date Month Day Year
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name FDUNFEE				Signature <i>[Signature]</i>		Date Month Day Year 8/29/85

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
BSWM Copies 1 & 3 mail to above.

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008962

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W.I.D.O.2.3.3.5.0.1.9.2		Manifest Document No. 0.0.1.0.9		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 28309							
4. Generator's Phone (414) 252-3550						B. State Generator's ID							
5. Transporter 1 Company Name Mr. Frank, Inc.			6. US EPA ID Number I.T.D.O.6.9.5.0.6.1.6.0			C. State Transporter's ID 0079							
7. Transporter 2 Company Name			8. US EPA ID Number			D. Transporter's Phone 312-596-3377							
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319						E. State Transporter's ID							
10. US EPA ID Number I.N.D.O.1.6.3.6.0.2.6.5						F. Transporter's Phone							
						G. State Facility's ID 9180890002							
						H. Facility's Phone 219-924-4370							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993						0.0.1 T		0.45.00		G		D001	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
<p>Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA.</p>													
15. Special Handling Instructions and Additional Information						<p>I also certify that I have a problem in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.</p>							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.													
Printed/Typed Name ROBERT J. LOCHMUTZ						Signature <i>[Signature]</i>		Date Month Day Year 09/19/85					
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name John Van Vleet		Signature <i>[Signature]</i>		Date Month Day Year 09/19/85			
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name		Signature		Date Month Day Year			
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						Printed/Typed Name R. DUNFEE		Signature <i>[Signature]</i>		Date Month Day Year 9/19/85			

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
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Mail Copies To: State of Wisconsin
Department of Natural Resources
Bureau of Solid Waste Mgt.
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Madison, Wisconsin 53708

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Chapter 144, Wis. Stats.

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W.I.D.O.2.3.3.5.0.1.9.2 0.0.1.1.0		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 28310			
4. Generator's Phone (414) 252-3550						B. State Generator's ID			
5. Transporter 1 Company Name Mr. Frank, Inc.						6. US EPA ID Number I.L.D.O.6.9.5.0.6.1.6.0			
7. Transporter 2 Company Name						C. State Transporter's ID			
8. US EPA ID Number						D. Transporter's Phone 312-596-3377			
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319						E. State Transporter's ID			
10. US EPA ID Number I.N.D.O.1.6.3.6.0.2.6.5						F. Transporter's Phone			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity	
						No.		Type	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993						0.01		T-T	
								4.2.2	
b.								G	
								D001	
c.									
d.									
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above			
Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA.									
15. Special Handling Instructions and Additional Information I also certify that I have a program in place to economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.									
Printed/Typed Name						Signature		Date	
T. Frank								1/17/71	
17. Transporter 1 Acknowledgement of Receipt of Materials									
Printed/Typed Name						Signature		Date	
Moe Alonzo								1.9.85	
18. Transporter 2 Acknowledgement of Receipt of Materials									
Printed/Typed Name						Signature		Date	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name						Signature		Date	
T. DUNFEE								10.7.85	

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
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STATE OF WISCONSIN

Mail Copies To:

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Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

Form 4400-66 Rev. 7-84
Chapter 144, Wis. Stats.

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W.I.D.O.2-3-3-5-0-1-9-2		Manifest Document No. 0-0-3-5-2		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals Corp. 14765 W. Bobolink Ave - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 28352				
4. Generator's Phone (414) 252-3550						B. State Generator's ID				
5. Transporter 1 Company Name Mr. Frank, Inc						C. State Transporter's ID 0079				
6. US EPA ID Number I.L.D.O.6-9-5-0-6-1-6-0						D. Transporter's Phone 312-596-3377				
7. Transporter 2 Company Name						E. State Transporter's ID				
8. US EPA ID Number						F. Transporter's Phone				
9. Designated Facility Name and Site Address American Chemical Service Inc 420 South Colfax Griffith, Indiana 46319						G. State Facility's ID				
10. US EPA ID Number I.N.D.O.1-6-3-6-0-2-6-5						H. Facility's Phone 219-924-4370				
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993						0-0-1	T-T	04500	G	D001
b.										
c.										
d.										
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above				
<p>Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) RCRA,</p> <p>I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.</p> <p>16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.</p>										
Printed/Typed Name						Signature			Date Month Day Year	
									1-0-3-1-85	
17. Transporter 1 Acknowledgement of Receipt of Materials									Date	
Printed/Typed Name MICHAEL MARTIN						Signature Michael Martin			Month Day Year 1-0-3-1-85	
18. Transporter 2 Acknowledgement of Receipt of Materials									Date	
Printed/Typed Name						Signature			Month Day Year	
19. Discrepancy Indication Space										
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.										
Printed/Typed Name EDUNFEE						Signature Edunfee			Date Month Day Year 1-0-3-1-85	

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
BSWM Copies 1 & 3 mail to above.

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STATE OF WISCONSIN

Form 4400-66 Rev. 7-84
Chapter 144, Wis. Stats.Mail Copies To: State of
Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

FOR BNR USE ONLY

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W I D Q 2 3 3 5 0 1 9 2 0 0 3 5 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Ave - Menomonee Falls, WI 53051				A. State Manifest Document Number WI 28351			
4. Generator's Phone (414) 252-3550				B. State Generator's ID			
5. Transporter 1 Company Name Mr. Frank, Inc.		6. US EPA ID Number I L D 0 6 5 0 6 1 6 0		C. State Transporter's ID			
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 312-596-3377			
				E. State Transporter's ID			
				F. Transporter's Phone			
9. Designated Facility Name and Site Address American Chemical Service Inc 420 South Colfax Griffith, Indiana 46319		10. US EPA ID Number I N D Q 1 6 3 6 0 2 6 5		G. State Facility's ID			
				H. Facility's Phone 219-924-4370			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993				0 0 1	T T	0 4 2 0 0	G D001
b.							
c.							
d.							
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above			
<p>Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) RCRA,</p> <p>I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.</p>							
15. Special Handling Instructions and Additional Information							
<p>I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.</p>							
Printed/Typed Name Robert J. Lockhouse				Signature <i>[Signature]</i>		Date 10/14/85	
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature <i>[Signature]</i>		Date 10/14/85	
Printed/Typed Name Mr. Frank, Inc.				Signature <i>[Signature]</i>		Date 10/14/85	
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature		Date	
Printed/Typed Name				Signature		Date	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name FDUNFEE				Signature <i>[Signature]</i>		Date 10/14/85	

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

210 F T-50

COPY 4

Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
BSWM Copies 1 & 3 mail to above.

008966

STATE OF WISCONSIN

Mail Copies To:

State of Wisconsin
Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

Form 4400-66 Rev. 7-84
Chapter 144, Wis. Stats.

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. WI D O 2 3 3 5 0 1 9 2		Manifest Document No. 0 0 3 5 3		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals Corp 14765 W. Bobolink Ave - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 28353			
4. Generator's Phone (414) 252-3550						B. State Generator's ID			
5. Transporter 1 Company Name Mr. Frank, Inc						6. US EPA ID Number END O 6 9 5 0 6 1 6 0			
7. Transporter 2 Company Name						8. US EPA ID Number			
9. Designated Facility Name and Site Address American Chemical Service Inc 420 South Colfax Griffith, Indiana 46319						10. US EPA ID Number END O 1 6 3 6 0 2 6 5			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993						No. 0 0 1 Type T T		14. Unit Wt/Vol 4.2.25 G	
b.						...		Waste No. D001	
c.						...			
d.						...			
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above			
<p>Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) RCRA,</p> <p>I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.</p>									
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Printed/Typed Name						Signature		Month Day Year	
17. Transporter 1 Acknowledgement of Receipt of Materials						Signature		Date	
Printed/Typed Name Robert Perkins						Signature <i>Robert Perkins</i>		Month Day Year 1/16/85	
18. Transporter 2 Acknowledgement of Receipt of Materials						Signature		Date	
Printed/Typed Name						Signature		Month Day Year	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						Date			
Printed/Typed Name FDUNFEE						Signature <i>FDunfee</i>		Month Day Year 1/16/85	

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
BSWM Copies 1 & 3 mail to above

COPY 4

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STATE OF WISCONSIN

Mail Copies To:

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Department of Natural Resources
Bureau of Solid Waste Mgt.
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Madison, Wisconsin 53708

Form 4400-66 Rev. 7-84
Chapter 144, Wis. Stats.

FOR DNR USE ONLY

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W-I-D-O-2-3-3-5-0-1-9-2		Manifest Document No. 0-0-8-5-4		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Ave - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 28354							
4. Generator's Phone (414) 252-3550						B. State Generator's ID							
5. Transporter 1 Company Name Mr. Frank Inc						C. State Transporter's ID							
6. US EPA ID Number I.L.D.O.6.9.5.0.5.1.6.8						D. Transporter's Phone 312-596-3377							
7. Transporter 2 Company Name						E. State Transporter's ID							
8. US EPA ID Number						F. Transporter's Phone							
9. Designated Facility Name and Site Address American Chemical Service Inc 420 South Colfax Griffith, Indiana 46319						G. State Facility's ID							
10. US EPA ID Number I.N.D.O.1.6.3.6.0.2.6.5						H. Facility's Phone 219-924-4370							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993						0.0.1 T.T		25.000 G		D001			
b.						..		..		
c.						..		..		
d.						..		..		
J. Additional Descriptions for Materials Listed Above Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002 (b) RCRA.						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.													
Printed/Typed Name					Signature					Date Month Day Year			
17. Transporter 1 Acknowledgement of Receipt of Materials					Signature					Date Month Day Year			
Printed/Typed Name					Signature					Date Month Day Year			
18. Transporter 2 Acknowledgement of Receipt of Materials					Signature					Date Month Day Year			
Printed/Typed Name					Signature					Date Month Day Year			
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name FDUNFEE					Signature F Dunfee					Date Month Day Year 11/14/85			

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
BSWM Copies 1 & 3 mail to above.

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008968

STATE OF WISCONSIN

Mail Copies To:

State of Wisconsin
Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

FOR DNR USE ONLY

*Form 4400-66 Rev. 7-84
Chapter 144, Wis. Stats.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W I D O 2 3 3 5 0 1 9 2		Manifest Document No. 0 0 3 5 5		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Ave - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 28355							
4. Generator's Phone (414) 252-3550						B. State Generator's ID							
5. Transporter 1 Company Name Mr. Frank, Inc.						C. State Transporter's ID							
6. US EPA ID Number I I D O 6 9 5 0 6 1 6 0						D. Transporter's Phone 312-596-3377							
7. Transporter 2 Company Name						E. State Transporter's ID							
8. US EPA ID Number						F. Transporter's Phone							
9. Designated Facility Name and Site Address American Chemical Service Inc 420 South Colfax Griffith, Indiana						G. State Facility's ID							
10. US EPA ID Number I N D O 1 6 3 6 0 2 6 5						H. Facility's Phone 219-924-4370							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. Waste Flammable Liquid NOS Flammable Liquid, UN 1993						0.0.1 T.T		0.5.0.0.0		G		Dool	
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(a) RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.						K. Handling Codes for Wastes Listed Above							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.						Date Month Day Year 1 1 1 8 5							
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Larry Allan Dietrich						Signature Larry Allan Dietrich							
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Mr. Frank, Inc.						Signature Mr. Frank, Inc.							
19. Discrepancy Indication Space						Date Month Day Year .							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						Date Month Day Year 1 1 1 8 5							
Printed/Typed Name NE DUNN						Signature NE DUNN							

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
BSWM Copies 1 & 3 mail to above.

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008969

STATE OF WISCONSIN

Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

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Form 4400-66 Rev. 7-84
Chapter 144, Wis. Stats.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W.I.D.O.2.3.3.5.0.1.9.2	Manifest Document No. 00356	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Ave - Menomonee Falls, WI 53051				A. State Manifest Document Number WI 28356		
4. Generator's Phone (414) 252-3550				B. State Generator's ID		
5. Transporter 1 Company Name Mr. Frank, Inc		6. US EPA ID Number I.L.D.O.6.9.5.0.6.1.6.0		C. State Transporter's ID 0129		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 312-596-3377		
9. Designated Facility Name and Site Address American Chemical Service Inc 420 South Colfax Griffith, Indiana 46319		10. US EPA ID Number I.N.D.O.1.6.3.6.0.2.6.5		E. State Transporter's ID		
				F. Transporter's Phone		
				G. State Facility's ID		
				H. Facility's Phone 219-924-4370		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993			901T	6.4.2.6.6	G	D001
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.						
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Printed/Typed Name MICHAEL J. ROSEN			Signature [Signature]		Date 1.20.85	
17. Transporter 1 Acknowledgement of Receipt of Materials			Signature [Signature]		Date 1.21.85	
18. Transporter 2 Acknowledgement of Receipt of Materials			Signature [Signature]		Date 1.21.85	
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name FDUNFEE			Signature [Signature]		Date 1.20.85	

Emergency 24 Hour Assistance Telephone Number:
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
BSWM Copies 1 & 3 mail to above.

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008970

Mail Copies To:

State of Wisconsin
Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

Rev. 7-84

Chapter 144, Wis. Stats.

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W-I-D-O-2-3-3-5-0-1-9-2-10-0-3-5-7		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Ave - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 28357							
4. Generator's Phone (414) 252-3550						B. State Generator's ID							
5. Transporter 1 Company Name Mr. Frank, Inc						C. State Transporter's ID 0079							
6. US EPA ID Number I-L-D-O-6-9-5-0-6-1-6-0						D. Transporter's Phone 312-596-3377							
7. Transporter 2 Company Name						E. State Transporter's ID							
8. US EPA ID Number						F. Transporter's Phone							
9. Designated Facility Name and Site Address American Chemical Service Inc 420 South Colfax Griffith, Indiana 46319						G. State Facility's ID							
10. US EPA ID Number I-N-D-O-1-6-3-6-0-2-6-5						H. Facility's Phone 219-924-4370							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. Waste Flammable Liquid NOS, Flammable Liquid, UN1993						0-0-1 T-T		24.200		G		D001	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
<p>Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) RCRA,</p> <p>I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.</p>													
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Printed/Typed Name LARRY A DIETRICH						Signature <i>Larry A Dietrich</i>		Date Month Day Year 0-1-1986					
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name <i>John Van Vleet</i>		Signature <i>John Van Vleet</i>		Date Month Day Year 02-2-1986			
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name		Signature		Date Month Day Year			
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name F DUNFEE						Signature <i>F Dunfee</i>		Date Month Day Year 2-2-86					

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
BSWM Copies 1 & 6 must go above.

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011081

STATE OF WISCONSIN

Form 4400-66 Rev. 7-84
Chapter 144, Wis. Stats.

Mail Copies To:

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Box 8094
Madison, Wisconsin 53708

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W-I-D-O-2-3-3-5-0-1-9-2		Manifest Document No. 0-0-3-5-8		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Ave. - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 28358							
4. Generator's Phone (414) 252-3550						B. State Generator's ID							
5. Transporter 1 Company Name Mr. Frank Inc.						C. State Transporter's ID 0079							
7. Transporter 2 Company Name						D. Transporter's Phone 312-596-3377							
8. US EPA ID Number I-L-D-O-6-9-5-0-6-1-6-0						E. State Transporter's ID							
9. Designated Facility Name and Site Address American Chemical Service Inc 420 South Colfax Griffith, Indiana 46319						F. Transporter's Phone							
10. US EPA ID Number I-N-D-O-1-6-3-6-0-2-6-5						G. State Facility's ID							
H. Facility's Phone 219-924-4370													
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993						0-0-1 T-T		0-5-0-00		G		D001	
b.						.		.					
c.						.		.					
d.						.		.					
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
<p>Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) RCRA,</p> <p>I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.</p>													
15. Special Handling Instructions and Additional Information													
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Printed/Typed Name LARRY Allen Dietrich						Signature <i>Larry Allen Dietrich</i>		Date Month Day Year 6-31-78					
17. Transporter 1 Acknowledgement of Receipt of Materials													
Printed/Typed Name MICHAEL GARCIA						Signature <i>Michael Garcia</i>		Date Month Day Year 6-31-78					
18. Transporter 2 Acknowledgement of Receipt of Materials													
Printed/Typed Name						Signature		Date Month Day Year					
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name <i>R. R. R.</i>						Signature <i>R. R. R.</i>		Date Month Day Year 6-31-78					

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
BSWM Copies 1 & 3 mail to above.

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210K
T-50

011088

STATE OF WISCONSIN

Form 4400-66 Rev. 7-84
Chapter 144, Wis. Stats.Mail Copies To: State of Wisconsin
Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. W. I. D. O. 2.3.3.5.0.1.9.2		Manifest Document No. 0.0.3.5.9		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Ave - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 28359							
4. Generator's Phone (414) 252-3550						B. State Generator's ID							
5. Transporter 1 Company Name Mr. Frazak, Inc						C. State Transporter's ID 0074							
6. US EPA ID Number I. L. D. O. 6.9.5.0.6.1.6.0						D. Transporter's Phone 312-596-3377							
7. Transporter 2 Company Name						E. State Transporter's ID							
8. US EPA ID Number						F. Transporter's Phone							
9. Designated Facility Name and Site Address American Chemical Service Inc 420 South Colfax Griffith, Indiana 46319						G. State Facility's ID							
10. US EPA ID Number I. N. D. O. 1.6.3.6.0.2.6.5						H. Facility's Phone 219-924-4370							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993						0.01 T-T		05.000 G				D001	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
<p>Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) RCRA,</p> <p>15. Special Handling Instructions and Additional Information</p> <p>I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.</p> <p>16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and according to the requirements of the Wisconsin Department of Natural Resources.</p>													
Printed/Typed Name LARRY Allen Dietrich						Signature <i>Larry Allen Dietrich</i>		Date Month Day Year 0.3.2.88.6					
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name Miguel Garcia		Signature <i>Miguel Garcia</i>		Date Month Day Year 0.3.2.88.6			
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name		Signature		Date Month Day Year			
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						Printed/Typed Name FDUNFEE		Signature <i>FDunfee</i>		Date Month Day Year 0.3.2.88.6			

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

212 E. 75 TSO

Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
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STATE OF WISCONSIN

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Chapter 144, Wis. Stats.

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Department of Natural Resources
Bureau of Solid Waste Mgt.
Box 8094
Madison, Wisconsin 53708

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. WI D O 2 3 3 5 0 1 9 2 0 0 3 6 0		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051						A. State Manifest Document Number WI 28360							
4. Generator's Phone (414) 252-3550						B. State Generator's ID							
5. Transporter 1 Company Name Mr. Frank, Inc						C. State Transporter's ID 0079							
6. US EPA ID Number I.L.D.O.6.9.5.0.6.1.6.0						D. Transporter's Phone 3120596-3377							
7. Transporter 2 Company Name						E. State Transporter's ID							
8. US EPA ID Number						F. Transporter's Phone							
9. Designated Facility Name and Site Address American Chemical Service Inc 420 South Colfax Griffith, Indiana 46319						G. State Facility's ID							
10. US EPA ID Number I.N.D.O.1.6.3.6.0.2.6.5						H. Facility's Phone 219-924-4370							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993						0.0.1 T.T		0.4, 20.0 G				D001	
b.						.		.					
c.						.		.					
d.						.		.					
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
Unless I am a small quantity generator who has been exempted by statute or regulation from then duty to make a waste minimization certification under Section 3002(b) RCRA,													
15. Special Handling Instructions and Additional Information													
I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.													
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Printed/Typed Name LARRY Allan Dietrich						Signature <i>Larry Allan Dietrich</i>		Date Month Day Year 0.3.21.86					
17. Transporter 1 Acknowledgement of Receipt of Materials													
Printed/Typed Name MICHAEL GARCIA						Signature <i>Michael Garcia</i>		Date Month Day Year 0.3.21.86					
18. Transporter 2 Acknowledgement of Receipt of Materials													
Printed/Typed Name						Signature		Date Month Day Year					
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name EDWIN REE						Signature <i>Edwin Ree</i>		Date Month Day Year 0.3.21.86					

Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)Distribution: 1 - BSWM 4 - Facility
2 - Generator 5 - Generator
3 - BSWM 6 - Transporter
BSWM Copies 1 & 3 mail to above.

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011090

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

DO NOT WRITE IN THIS SPACE

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Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal law	
		WI D 0 2 3 3 | 5 0 1 9 2 9 | 4 0 4 5		1					
3. Generator's Name MILWAUKEE SOLVENTS & CHEMICALS 14765 WEST BOBOLINK AVENUE - MEMOMONKE FALLS, WI 53051		6. US EPA ID Number IL D 0 6 9 | 5 0 6 1 | 6 0		A. State Manifest Document Number IN 094045		B. State Generator's ID			
4. Generator's Phone (414) 252-3550		7. Transporter 1 Company Name MR. FRANK, INC.		C. State Transporter's ID		D. Transporter's Phone 312-596-3377			
5. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone			
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE INC. 420 SOUTH COLFAX GRIFFITH, INDIANA 46319		10. US EPA ID Number IN D 0 1 6 | 3 6 0 2 | 6 5		G. State Facility's ID		H. Facility's Phone 219-924-4370			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
		No. Type							
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID, UN1993		0 0 1 T T 0		38--		G		D001	
b.									
c.									
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.		Printed/Typed Name SEAN R. J...		Signature <i>[Signature]</i>		Month Day Year 01 13 97			
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name MR. W...		Signature <i>[Signature]</i>		Month Day Year 01 13 97			
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature		Month Day Year			
19. Discrepancy Indication Space									
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.		Printed/Typed Name EDWIN FEE		Signature <i>[Signature]</i>		Month Day Year 01 13 87			

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035
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Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal law	
3. Generator's Name Milwaukee Solvents & Chemicals		W I D 0 2 3 3 5 0 1 9 2 9 4 0 9 6		A. State Manifest Document Number IN 094046					
4. Generator's Address 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051		5. US EPA ID Number IL D 0 6 9 5 0 6 1 6 0		B. State Generator's ID					
5. Transporter 1 Company Name Mr. Frank, Inc.		6. US EPA ID Number		C. State Transporter's ID 0079					
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 312-596-3377					
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319		10. US EPA ID Number IN D 0 1 6 3 6 0 2 6 5		E. State Facility's ID					
				F. Transporter's Phone					
				G. State Facility's ID					
				H. Facility's Phone 219-924-4370					
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. Waste Flammable Liquid NOS		No. Type							
b. Flammable Liquid, UN1993		0 0 1 T T		6 5 5 1 6 0		G		D 0 0 1	
c.									
d.									
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.		Printed/Typed Name		Signature		Month Day Year			
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature		Month Day Year			
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature		Month Day Year			
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.		Printed/Typed Name		Signature		Month Day Year			

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

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Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal law	
		W I D 0 2 3 3 5 0 1 9 2 9 4 0 4 7							
3. Generator's Name Milwaukee Solvents & Chemicals		4. Generator's Phone (414) 252-3550		6. US EPA ID Number I L D 0 6 9 5 0 6 1 6 0		A. State Manifest Document Number IN 094047		B. State Generator's ID	
5. Transporter 1 Company Name Mr. Frank, Inc.		7. Transporter 2 Company Name		8. US EPA ID Number		C. State Transporter's ID 0079		D. Transporter's Phone 312-596-3377	
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, IN 46319		10. US EPA ID Number I N D 0 1 6 3 6 0 2 6 5				E. State Transporter's ID		F. Transporter's Phone	
						G. State Facility's ID		H. Facility's Phone 219-924-4370	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
		No. Type							
a. Waste Flammable Liquid NOS Flammable Liquid, UN1993		0 0 1 T T		1 5 4 0 1 2		G		D 0 0 1	
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.									
Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.									
Printed/Typed Name <i>[Signature]</i>		Signature <i>[Signature]</i>		Month Day Year <i>[Date]</i>					
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name <i>[Signature]</i>		Signature <i>[Signature]</i>		Month Day Year <i>[Date]</i>			
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name <i>[Signature]</i>		Signature <i>[Signature]</i>		Month Day Year <i>[Date]</i>			
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.		Printed/Typed Name <i>[Signature]</i>		Signature <i>[Signature]</i>		Month Day Year <i>[Date]</i>			

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

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Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law
3. Generator's Name Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051		1. Generator's US EPA ID No. WI D D 2 3 3 5 0 1 9 2 9 4 0 4 B		A. State Manifest Document Number IN 094048	B. State Generator's ID
4. Generator's Phone (414) 252-3550		6. US EPA ID Number IL D D 6 9 5 0 5 1 6 0		C. State Transporter's ID 0577	D. Transporter's Phone 312-596-3377
5. Transporter 1 Company Name Mr. Frank, Inc.		8. US EPA ID Number		E. State Transporter's ID	F. Transporter's Phone
7. Transporter 2 Company Name		10. US EPA ID Number		G. State Facility's ID 9180890002	H. Facility's Phone 219-924-4370
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319		11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Waste Flammable Liquid NOS Flammable Liquid, UN1993		12. Containers No. Type 001 TT	13. Total Quantity 51400 B
				14. Unit Wt/Vol B	I. Waste No. D001
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.					
Printed/Typed Name MICHAEL J. ROEBKEN		Signature <i>Michael J. Roebken</i>		Month Day Year 03 03 87	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature <i>JACK MCCLEVERTY</i>		Date 03 13 87	
Printed/Typed Name JACK MCCLEVERTY		Signature		Month Day Year	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Date	
Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.					
Printed/Typed Name <i>Robert</i>		Signature <i>Robert</i>		Month Day Year 03 03 87	

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IN 094048

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UNITED STATES OF AMERICA		WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal law	
				WI | D | 02 | 3 | 35 | 0 | 19 | 42 | 93 | 0 | 8 | 2		1					
3. Generator's Name MILWAUKEE SOLVENTS & CHEMICALS 14765 WEST BOBOLINK AVENUE - MENOMONKEE FALLS, WI 53051						A. State Manifest Document Number IN 093082					
4. Generator's Phone (414) 252-3550						B. State Generator's ID					
5. Transporter 1 Company Name MR. FRANK, INC.						C. State Transporter's ID					
7. Transporter 2 Company Name						D. Transporter's Phone 312-596-3377					
6. US EPA ID Number 1 | 1 | 0 | 0 | 69 | 5 | 0 | 61 | 60						E. State Transporter's ID					
8. US EPA ID Number						F. Transporter's Phone					
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE INC. 420 SOUTH COLFAX GRIFFITH, INDIANA 46319						10. US EPA ID Number 1 | N | 00 | 1 | 6 | 3 | 8 | 0 | 2 | 6 | 5					
						G. State Facility's ID					
						H. Facility's Phone 219-924-6370					
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol	
						No. Type				Waste No.	
a. WASTE FLAMMABLE LIQUID NOS FLAMMABLE LIQUID, UN 1993						0 | 0 | 1 | T | T		795 | 10		C 0001	
b.											
c.											
d.											
J. Additional Descriptions for Materials Listed Above						or Wastes Listed Above					
15. Special Handling Instructions and Additional Information											
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.											
Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.											
Printed/Typed Name <i>Thomas J. P...</i>						Signature <i>[Signature]</i>				Month Day Year 12/1/97	
17. Transporter 1 Acknowledgement of Receipt of Materials										Date	
Printed/Typed Name <i>[Signature]</i>						Signature <i>[Signature]</i>				Month Day Year	
18. Transporter 2 Acknowledgement of Receipt of Materials										Date	
Printed/Typed Name						Signature				Month Day Year	
19. Discrepancy Indication Space											
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.											
Printed/Typed Name <i>[Signature]</i>						Signature <i>[Signature]</i>				Month Day Year 9/1/98	

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UHWM 2/LP2

012840

Division of Land Pollution Control - Manifest
Indiana State Board of Health
P.O. Box 7035
Indianapolis, IN 46207-7035

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Form Approved OMB No. 2000 0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law
3. Generator's Name MILWAUKEE SOLVENTS & CHEMICALS 14765 W. BOBOLINK AVENUE - MENOMONEE FALLS,		W I D O 2 3 3 5 0 1 9 2 9 3 0 8 1		A. State Manifest Document Number IN 093081	
4. Generator's Phone (414) 252-3550 WI. 53051		6. US EPA ID Number I L D O 6 9 5 0 6 1 6 0		B. State Generator's ID	
5. Transporter 1 Company Name MR. FRANK, INC.		8. US EPA ID Number		C. State Transporter's ID 2079	
7. Transporter 2 Company Name		10. US EPA ID Number		D. Transporter's Phone 322-596-3377	
9. Designated Facility Name and Site Address AMERICAN CHEMICAL SERVICE INC. 420 SOUTH COLPAX GRIFFITH, INDIANA 46319		12. Containers		E. State Transporter's ID	
		No. Type		F. Transporter's Phone	
				G. State Facility's ID	
				H. Facility's Phone	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		13. Total Quantity		I. Waste No.	
a. WASTE FLAMMABLE LIQUID NOS					
b. FLAMMABLE LIQUID, UN 1993		0 0 1 T T		G D001	
c.					
d.					
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.					
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Printed/Typed Name		Signature		Month Day Year	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature		Date	
Printed/Typed Name		Signature		Month Day Year	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Date	
Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19.					
Printed/Typed Name		Signature		Month Day Year	

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law
3. Generator's Name Milwaukee Solvents & Chemicals 14765 W. Bobolink Avenue - Menomonee Falls, WI 53051		W I D 0 2 3 3 5 0 1 9 2 3 6 1 6 9		A. State Manifest Document Number IN 036169	
4. Generator's Phone (414) 252-3550		6. US EPA ID Number I L D 0 5 9 5 0 6 1 6 0		B. State Generator's ID 036169	
5. Transporter 1 Company Name Mr. Frank, Inc		8. US EPA ID Number I N D 0 1 6 3 6 0 2 2 6 5		C. State Transporter's ID 036169	
7. Transporter 2 Company Name		10. US EPA ID Number		D. Transporter's Phone 312-596-3377	
9. Designated Facility Name and Site Address American Chemical Service Inc. 420 South Colfax Griffith, Indiana 46319		10. US EPA ID Number I N D 0 1 6 3 6 0 2 2 6 5		E. State Transporter's ID 036169	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Waste Flammable Liquid NOS Flammable Liquid, UN 1993		12. Containers No. Type 001 T T 05600 G		13. Total Quantity 05600 G	
14. Unit 05600 G		15. Waste No. D001			
16. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.					
Printed/Typed Name LARRY Allan Dietrich		Signature <i>Larry Allan Dietrich</i>		Month Day Year 11 24 86	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Donald H. Bell		Signature <i>Donald H. Bell</i>		Month Day Year 11 24 86	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19. Printed/Typed Name FDUNFEE					
Signature <i>FDunfee</i>		Month Day Year 11 24 86			

EPA Form 8700-22A (Rev. 11-85)

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UHMW 2/LP2

012836

A 116175

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIND023350192		3. EMERGENCY TELEPHONE INSTRUCTIONS	
4. P.O. BOX OR STREET ADDRESS P.O. Box 444					
5. CITY, STATE, ZIP CODE Butler, Wisconsin 53007		6. TELEPHONE NUMBER (414) 252-3550			
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4500	9. WASTE NAME Waste Flammable Liquid NMS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993
				12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003
				1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>	
				1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>	

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. Information contained herein is true, accurate and complete.

15. AUTHORIZED SIGNATURE

16. NAME (Print)

RECEIVER SECTION

17. COMPANY NAME Frank, Inc.		18. EPA IDENTIFICATION NO. ILRL004506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			

I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

24. AUTHORIZED SIGNATURE _____ 25. Date Accepted _____

I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.

27. 2nd. TRANSPORTER FOR HAZARDOUS WASTE _____ 28. EPA IDENTIFICATION NO. _____

29. AUTHORIZED SIGNATURE _____ 31. Date Accepted _____

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax	
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319	36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS	

I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted at the facility designated as Hazardous Waste Facility.

38. AUTHORIZED SIGNATURE _____ 39. NAME (Print) **FDUNFEE** 40. Date Accepted **3/13/84**

I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted at the facility designated as Hazardous Waste Facility.

41. ALTERNATE HAZARDOUS WASTE FACILITY _____ 42. EPA IDENTIFICATION NO. _____

43. AUTHORIZED SIGNATURE _____ 44. NAME (Print) _____ 45. Date Accepted _____

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
P.O. Box 4000
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number:
In Wisconsin (608) 266-8231
Outside Wisconsin (800) 224-8303

FOR USE ONLY

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HAZARDOUS WASTE FACILITY

1-210K T-50

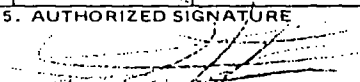
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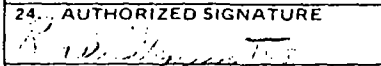
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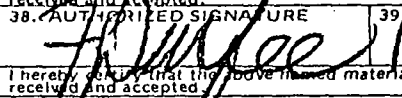
122158

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION													
1. COMPANY NAME Milwaukee Solvents & Chemicals				2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS							
4. P.O. BOX OR STREET ADDRESS P.O. Box 444													
5. CITY, STATE, ZIP CODE Bütlar, WI 53007				6. TELEPHONE NUMBER (414) 252-3550									
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME				10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)		13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)		
(1) Tanker	4200	Waste Flammable Liquid NOS				Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid		F003	33,600		
								1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid					
								1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid					
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.						15. AUTHORIZED SIGNATURE 		16. NAME (Print) Robert L. Howitz		17. DATE SHIPPED M / D / Y 3/21/84			

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE 	25. NAME (Print) Robert L. Howitz	26. Date Accepted M / D / Y 3/21/84	
I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE 	39. NAME (Print) Robert L. Howitz	40. Date Accepted M / D / Y 3/21/84	
I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 RT-50 6CW
3/21/84

006836

See reverse side, Copy 6, for instructions.

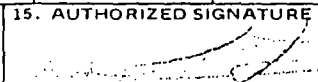
Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

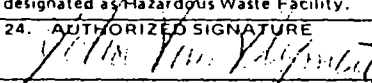
REV. 6-81

A 122159

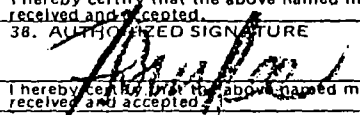
GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P. O. Box 444								
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	4200	Waste Flammable Liquid NOS		Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	F003	23,600
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE 		16. NAME (Print) Bob Lachowicz		17. DATE SHIPPED M / D / Y 3-26-84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, Illinois 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE 	25. NAME (Print) John J. Frank	26. Date Accepted 3/26/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4282	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE 	39. NAME (Print) F. D. Miller	40. Date Accepted 3-26-84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

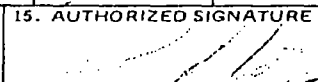
To 212 ET-50
6PM 3-26-84

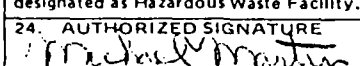
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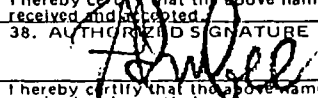
122160

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION				3. COMMENTS/SPECIAL INSTRUCTIONS			
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192					
4. P.O. BOX OR STREET ADDRESS P.O.Box 444							
5. CITY, STATE, ZIP CODE Battle, Wisconsin 53007		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4500	9. WASTE NAME Waste Flammable Liquid NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 26,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE 		16. NAME (Print) Bob Lechowicz	
						17. DATE SHIPPED M / D / Y 3/30/84	

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE 	25. NAME (Print) Michael L. Martin	26. Date Accepted 3/30/84
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax		
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE 	39. NAME (Print) EDUWILL	40. Date Accepted 3/30/84
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY


T0210KT-50
GRM 3-30-84

A 122161

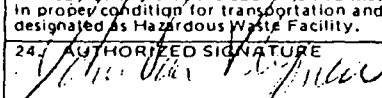
See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

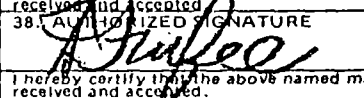
GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P. O. Box 444								
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414-252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4500	9. WASTE NAME Waste Flammable Liquid NOS		10. US DOT HAZARD CLASS Flammable liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 36,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE 		16. NAME (Print) Paul Lockowitz		17. DATE SHIPPED M / D / Y 4/4/84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE 	25. NAME (Print) John Frank	26. Date Accepted M / D / Y 4/4/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219-924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE 	39. NAME (Print) EDUNFER	40. Date Accepted M / D / Y 4/4/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

To 210 K-T-50
BNU 4.4.84

006840

See reverse side, Copy 6, for instructions.

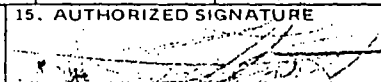
Please type or print clearly using ball point pen - press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

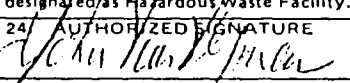
REV. 6-81

A - 122162

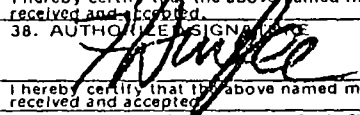
GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS P. O. Box 444							
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414.252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4500	9. WASTE NAME Waste Flammable Liquid NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 36000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE 		16. NAME (Print) John Frank	
						17. DATE SHIPPED M 11 / D 18 / Y 84	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312-596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE 	25. NAME (Print) John Frank	26. Date Accepted M 11 / D 18 / Y 84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219-924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE 	39. NAME (Print) John Frank	40. Date Accepted M 11 / D 18 / Y 84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0212RT-SD GRM
4.9.84

006839

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

REV. 6-81

MANIFEST NUMBER

A 122163

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION													
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS									
4. P.O. BOX OR STREET ADDRESS P.O.Box 444													
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550											
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. USE EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)					
(1) Tanker	4500	Waste Flammable Liquid-NOS		Flammable Liquid	UN1993	1. Solid 3. Mixture 2. Liquid <input checked="" type="checkbox"/>	P003	36,000					
						1. Solid 3. Mixture 2. Liquid <input type="checkbox"/>							
						1. Solid 3. Mixture 2. Liquid <input type="checkbox"/>							
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>[Signature]</i>				16. NAME (Print) Rob Lochowitz				17. DATE SHIPPED M / D / Y 4/16/84	

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) John V. [unclear]	26. Date Accepted 4/16/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) EDUNFEE	40. Date Accepted 4/16/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

T0210RT-50 6044 4/16/84


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122164

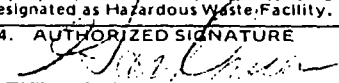
See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

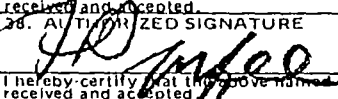
GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O. Box 444								
5. CITY, STATE, ZIP CODE Butler, WI 53007				6. TELEPHONE NUMBER (414) 252-3550				
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	4500	Waste Flammable Liquid NOS		Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	F003	26,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE 		16. NAME (Print) Bob Lochowicz		17. DATE SHIPPED 4/24/84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE 	25. NAME (Print) GARY DARGATZ	26. Date Accepted 4/21/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE 	39. NAME (Print) EDUNTER	40. Date Accepted 4/24/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

TO 211RT-50
6PM 4.24.84

006844

MANIFEST NUMBER
A 122165

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS P.O. Box 444							
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	4,500	Waste Flammable Liquid NOS	Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	F003	36,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Robert Heiter</i>		16. NAME (Print) Robert Heiter	
						17. DATE SHIPPED 4/30/84	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION IND069505160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Michael Garcia</i>	25. NAME (Print) Michael Garcia	26. Date Accepted 4/19/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>FDON FEE</i>	39. NAME (Print) FDON FEE	40. Date Accepted 4/30/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

212 K T-50 GPM

A

122166

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS P.O. Box 444							
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	4500	Waste Flammable Liquid NOS.	Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	F003	30,000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>[Signature]</i>		16. NAME (Print) Bob Lockwood	
						17. DATE SHIPPED M / D / Y 5/2/84	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) Tom V. Vignard	26. Date Accepted 5/2/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) EDWIFE	40. Date Accepted 5/2/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

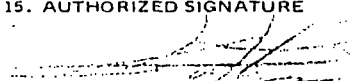
TO 212R T-50 GRM

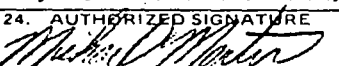
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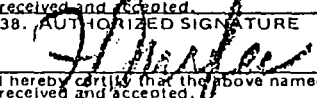
A 122167

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION				3. COMMENTS/SPECIAL INSTRUCTIONS			
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WI0023350192					
4. P.O. BOX OR STREET ADDRESS P.O. Box 444							
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4200	9. WASTE NAME Waste Flammable Liquid NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 53600
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE 		16. NAME (Print) Bob Lachowicz	17. DATE SHIPPED M / D / Y 5/9/84

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE 	25. NAME (Print) Michael Martin	26. Date Accepted 5/9/84
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax		
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE 	39. NAME (Print) ED DUNFEE	40. Date Accepted 5/9/84
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

(267) 506244

A 122168

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O. Box 444								
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 4200	9. WASTE NAME Waste Flammable Liquid NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 33,600
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>James Allen Dietrich</i>		16. NAME (Print) Kerry A Dietrich		17. DATE SHIPPED M D Y 5/9/84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) Michael S. Martin	26. Date Accepted 5/9/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) FDUNEE	40. Date Accepted 5/9/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

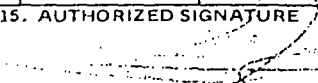
210R T-50

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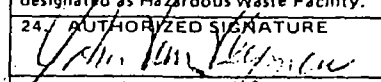
See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

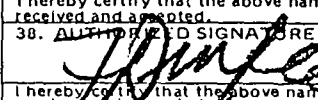
GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID0233501921		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O.Box 444								
5. CITY, STATE, ZIP CODE Butler, W 153007				6. TELEPHONE NUMBER (414) 252-3550				
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
(1) Tanker	4200	Waste Flammable Liquid NOS		Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	F003	53600
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE 		16. NAME (Print) Bob Lockwood		17. DATE SHIPPED M / D / Y 5/10/84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE 	25. NAME (Print) John Van Vliet	26. Date Accepted 5/10/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE 	39. NAME (Print) ED DUNFEE	40. Date Accepted M / D / Y 5/10/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	
46. MAIL TO: Department of Natural Resources Bureau of Solid Waste Management Box 8094 Madison, Wisconsin 53708		47. Emergency 24 Hour Assistance Telephone Number In Wisconsin (608-266-3232) Outside Wisconsin (800-424-8802)	
FOR DNR USE ONLY			

HAZARDOUS WASTE FACILITY

210E T50

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See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O. Box 444								
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Flammable Liquid NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 36,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Samy Allan Dietrich</i>		16. NAME (Print) Samy A Dietrich		17. DATE SHIPPED 5/16/84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>John Van Vliet</i>	25. NAME (Print) John Van Vliet	26. Date Accepted 5/16/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>EDUN FEE</i>	39. NAME (Print) EDUN FEE	40. Date Accepted 5/16/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

210RT-50

5788845

A 122171

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O.Box 444								
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Flammable Liquid NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 36,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Larry A. Dietrich</i>		16. NAME (Print) Larry A. Dietrich		17. DATE SHIPPED M / D / Y 5/18/84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Michael Frank</i>	25. NAME (Print) Michael Frank	26. Date Accepted 5/18/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IEDO16360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>SR MURPHY</i>	39. NAME (Print) SR MURPHY	40. Date Accepted 5/18/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

205 RT-50

A 124251

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID083350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O.Box 444								
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 4,800	9. WASTE NAME Waste Flammable Liquid NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. USE EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 40,800
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Larry A Dietrich</i>		16. NAME (Print) Larry A Dietrich		17. DATE SHIPPED M / D / Y 5/24/84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>John Van Vlymen</i>		25. NAME (Print) John Van Vlymen	
26. Date Accepted 5/24/84			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	
31. Date Accepted M / D / Y			

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>FDUNFEE</i>		39. NAME (Print) FDUNFEE	
40. Date Accepted 5/24/84			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
45. Date Accepted M / D / Y			

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY.

HAZARDOUS WASTE FACILITY

211E-T-50

006849

A

124252

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION							
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS P.O. Box 444							
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Flammable Liquid NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 38,250
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Fang Allen Dietrich</i>		16. NAME (Print) Harry A. Dietrich	
						17. DATE SHIPPED M / D / Y 5/25/84	

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>John W. Wynn</i>	25. NAME (Print) John W. Wynn	26. Date Accepted 5/25/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>FDUN FEE</i>	39. NAME (Print) FDUN FEE	40. Date Accepted 5/25/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46: MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

2127 T-50

A 124253

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O.Box 444								
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Flammable Liquid NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 38,250
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>James A. Dietrich</i>		16. NAME (Print) James A Dietrich		17. DATE SHIPPED M / D / Y 5/30/84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Mike Pfeiffer</i>	25. NAME (Print) MIKE PFEIFFER	26. Date Accepted M / D / Y 5-30-84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Frank</i>	39. NAME (Print) F DUNFEE	40. Date Accepted M / D / Y 5-30-84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

211KTS-5811

See reverse side; Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

REV. 6-81

A 124254

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O. Box 444								
5. CITY, STATE, ZIP CODE Butler, WI 53007				6. TELEPHONE NUMBER () -				
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Flammable Liquid NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 38,250
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Jerry Allan Dietrich</i>		16. NAME (Print) Jerry A Dietrich		17. DATE SHIPPED M / D / Y 6 / 1 / 81

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD060506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>E. W. GUNCE</i>	25. NAME (Print) E. W. GUNCE	26. Date Accepted M / D / Y 6 / 1 / 81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Joe Dunfee</i>	39. NAME (Print) JOE DUNFEE	40. Date Accepted M / D / Y 6 / 1 / 81	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

211K T-50

006852

A 124255

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O. Box 444								
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 4,200	9. WASTE NAME Waste Flammable Liquid NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 35,000
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Long Allen Dietrich</i>		16. NAME (Print) Larry A Dietrich		17. DATE SHIPPED M / D / Y 6/5/84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Michael Martin</i>	25. NAME (Print) Michael Martin	26. Date Accepted 6/5/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>FDUNLEE</i>	39. NAME (Print) FDUNLEE	40. Date Accepted 6/5/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

212K T-50

006851

A 124256

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS P.O. Box 444							
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Flammable Liquid NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 38,250
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Larry Allan Dietrich</i>		16. NAME (Print) Larry A Dietrich	17. DATE SHIPPED 6/11/84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Michael Martin</i>	25. NAME (Print) Michael Martin	26. Date Accepted 6/11/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Michael Martin</i>	39. NAME (Print) Michael Martin	40. Date Accepted 6/11/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

210R T-50

006855

A 124257

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS P.O. Box 444							
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 4,200	9. WASTE NAME Waste Flammable Liquid NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 35,700
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Harry A Dietrich</i>		16. NAME (Print) Harry A Dietrich	
						17. DATE SHIPPED M / D / Y 6/27/84	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Michael Martin</i>	25. NAME (Print) MICHAEL MARTIN	26. Date Accepted 6/27/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Frank</i>	39. NAME (Print) FRANK	40. Date Accepted 6/27/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:

Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

210 K T-50 13,600
1.6%

006857

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION							
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS P.O.Box 444							
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 5000	9. WASTE NAME Waste Flammable Liquid NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 32000
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Kurt K. Tward</i>		16. NAME (Print) Kurt K. Tward	
						17. DATE SHIPPED M / D / Y 6/27/84	

TRANSPORTER SECTION			
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Michael J. Martin</i>	25. NAME (Print) Michael J. Martin	26. Date Accepted 6/30/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION			
32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Frank</i>	39. NAME (Print) FRANK	40. Date Accepted 7/2/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

212K T-50

950856

MANIFEST NUMBER
A 124259

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O. Box 444								
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 5,500	9. WASTE NAME Waste Flammable Liquid NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 46,750
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>[Signature]</i>		16. NAME (Print) Larry A. Diefenbach		17. DATE SHIPPED M / D / Y 7/12/84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>		25. NAME (Print) CE MILBURN	
		26. Date Accepted M / D / Y 7/12/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	
		31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>		39. NAME (Print) FEDVNFES	
		40. Date Accepted M / D / Y 7/12/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

212KT-50 10Y003TU
2Y.CO.

006858

A 124260

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS P.O. Box 444							
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Flammable Liquid NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 36,250
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Larry A Dietrich</i>		16. NAME (Print) Larry A Dietrich	17. DATE SHIPPED M / D / Y 7/24/84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER 312 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>John Van Vleet</i>	25. NAME (Print) John Van Vleet	26. Date Accepted 7/24/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4300	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>John Van Vleet</i>	39. NAME (Print) John Van Vleet	40. Date Accepted 7/24/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

210RT-50

10400B

1.67.CP

0068862

A 124261

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WTD023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O. Box 444								
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 4500	9. WASTE NAME Waste Flammable Liquid NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 7250
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>[Signature]</i>		16. NAME (Print) James P. Fitzgerald		17. DATE SHIPPED M / D / Y 7/12/84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) John Van Vlymen	26. Date Accepted 7/13/84	
I hereby certify that the above named materials and indicated quantity (ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) EDUWFE	40. Date Accepted M / D / Y 7/13/84	
I hereby certify that the above named materials and indicated quantity (ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

21KE T-50
10800 BTU/LB; 1% CL

006861

A

124262

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O. Box 444								
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER (1) Tanker	8. GALLONS 1500	9. WASTE NAME Waste Flammable Liquid NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds)
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>[Signature]</i>		16. NAME (Print) [Name]		17. DATE SHIPPED M / D / Y 8/3/84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted, in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>	25. NAME (Print) John V. Vignone	26. Date Accepted 8/3/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted, in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>	39. NAME (Print) FD UNFET-8	40. Date Accepted 8/3/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

212E T-50 12,400
17.00

A

124263

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O. Box 444								
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Flammable Liquid NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 38250
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>For William Dietrich</i>		16. NAME (Print) Wm. A Dietrich		17. DATE SHIPPED 8/8/84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Donald H. Bult</i>	25. NAME (Print) Donald H. Bult	26. Date Accepted 8/8/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE <i>Harold F. Schmidt</i>	30. NAME (Print) Harold F. Schmidt	31. Date Accepted 08/21/84	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE	39. NAME (Print)	40. Date Accepted M / D / Y	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

212R T-50

12800 BTU/LB
1.67.00

A 124264

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS P.O.Box 444							
5. CITY, STATE, ZIP CODE Butler, Wisconsin 53007		6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 5,000	9. WASTE NAME Waste Flammable Liquid NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 42,500
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Larry Allan Dietrich</i>		16. NAME (Print) Larry A. Dietrich	17. DATE SHIPPED M / D / Y 8/13/84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>John Van Wygen</i>	25. NAME (Print) John Van Wygen	26. Date Accepted 8/13/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Edunfee</i>	39. NAME (Print) EDUNFEE	40. Date Accepted 8/13/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

204R T-50 10200 BTU/LB
2.6 % CL

A 124265

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O. Box 444								
5. CITY, STATE, ZIP CODE Butler, WI 53007			6. TELEPHONE NUMBER (414) 252-3550					
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 4,500	9. WASTE NAME Waste Flammable Liquid NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 38,250
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Larry A. Dietrich</i>		16. NAME (Print) Larry A. Dietrich		17. DATE SHIPPED M D Y 8/16/89

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Michael F. Martin</i>		25. NAME (Print) Michael F. Martin	
		26. Date Accepted 8/15/89	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	
		31. Date Accepted M D Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Frank</i>		39. NAME (Print) Frank	
		40. Date Accepted 8/16/89	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted 8/16/89	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

210E 10700 Bru/LB
T-50 1.77. CP.

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

REV. 6-81

A 124266

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS P.O. Box 444				6. TELEPHONE NUMBER (414) 252-3550			
5. CITY, STATE, ZIP CODE Butler, WI 53007		7. NUMBER & TYPE OF CONTAINER Tanker 4,500		8. GALLONS 4,500		9. WASTE NAME Waste Flammable Liquid NOS	
		10. US DOT HAZARD CLASS Flammable Liquid		11. US DOT IDENTIFICATION NUMBER UN1993		12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	
				13. US EPA WASTE CODE F003		14. SHIPPING WEIGHT (Pounds) 381250	
				15. AUTHORIZED SIGNATURE <i>Larry A. Orlich</i>		16. NAME (Print) Larry A. Orlich	
				17. DATE SHIPPED M / D / Y 8/22/84			

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Michael Martin</i>		25. NAME (Print) Michael MARTIN	
		26. Date Accepted 8/22/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	
		31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Donna F. White</i>		39. NAME (Print) DONNA F. WHITE	
		40. Date Accepted 8/22/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

211F T-50 12200 BTU/LB
1.97 CL.

598900

A 124267

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192		3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS P.O.Box 444							
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3580					
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 4200	9. WASTE NAME Waste Flammable Liquid NOS	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 35,700
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
					1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>Larry A. Dietrich</i>		16. NAME (Print) Larry A. Dietrich	
						17. DATE SHIPPED M / D / Y 8/24/84	

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Michael D. Martin</i>	25. NAME (Print) Michael D. Martin	26. Date Accepted 8/24/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>Frank</i>	39. NAME (Print) FRANK	40. Date Accepted 8/24/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
		45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

210K T-50

10900 Btu/lb
1.87. C.

A

124268

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O.Box 444								
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME		10. US DOT HAZARD CLASS	11. US DOT IDENTIFICATION NUMBER	12. PHYSICAL STATE (Enter number in box)	13. US EPA WASTE CODE	14. SHIPPING WEIGHT (Pounds)
Tanker	4,500	Waste Flammable Liquid NOS		Flammable Liquid	UN1993	1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	F003	38,250
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>James Allen Stine</i>		16. NAME (Print) James Allen Stine		17. DATE SHIPPED M / D / Y 8/27/84

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>Michael Martin</i>	25. NAME (Print) Michael Martin	26. Date Accepted 8/27/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y	

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>James Hunter</i>	39. NAME (Print) JAMES HUNTER	40. Date Accepted 8/27/84	
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y	

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53708

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

205K

T-50

11300 BTU/LB
1.9 Y. CD.

A 124269

See reverse side, Copy '6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION

1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WID023350192		3. COMMENTS/SPECIAL INSTRUCTIONS				
4. P.O. BOX OR STREET ADDRESS P.O. Box 444								
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550						
7. NUMBER & TYPE OF CONTAINER Tanker	8. GALLONS 4500	9. WASTE NAME Waste Flammable Liquid NOS		10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>	13. US EPA WASTE CODE F003	14. SHIPPING WEIGHT (Pounds) 38250
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
						1. Solid 3. Mixture <input type="checkbox"/> 2. Liquid <input type="checkbox"/>		
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.				15. AUTHORIZED SIGNATURE <i>[Signature]</i>		16. NAME (Print) <i>[Signature]</i>		17. DATE SHIPPED M / D / Y 11-14

TRANSPORTER SECTION

18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILD069506160	
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street			
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377	
23. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
24. AUTHORIZED SIGNATURE <i>[Signature]</i>		25. NAME (Print) John A. Lippert	
26. Date Accepted 9/5/84			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.			
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.	
29. AUTHORIZED SIGNATURE		30. NAME (Print)	
31. Date Accepted M / D / Y			

HAZARDOUS WASTE FACILITY SECTION

32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. IND016360265	
34. P.O. BOX OR STREET ADDRESS 420 South Colfax			
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370	
37. COMMENTS			
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.			
38. AUTHORIZED SIGNATURE <i>[Signature]</i>		39. NAME (Print) EDDUNKEE	
40. Date Accepted M / D / Y 9/5/84			
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.	
43. AUTHORIZED SIGNATURE		44. NAME (Print)	
45. Date Accepted M / D / Y			

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

211 RT-50 9500 BTU
2 Y.C.

A 124270

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen - press hard.

GENERATOR (SHIPPER) SECTION			
1. COMPANY NAME Milwaukee Solvents & Chemicals		2. EPA IDENTIFICATION NO. WIDO23350192	
3. COMMENTS/SPECIAL INSTRUCTIONS			
4. P.O. BOX OR STREET ADDRESS P.O. Box 444			
5. CITY, STATE, ZIP CODE Butler, WI 53007		6. TELEPHONE NUMBER (414) 252-3550	
7. NUMBER & TYPE OF CONTAINER	8. GALLONS	9. WASTE NAME	10. US DOT HAZARD CLASS
Tanker	4,200	Waste Flammable Liquid NOS	Flammable Liquid
			11. US DOT IDENTIFICATION NUMBER UN1993
			12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid <input type="checkbox"/>
			13. US EPA WASTE CODE F003
			14. SHIPPING WEIGHT (Pounds) 55,700
15. AUTHORIZED SIGNATURE			
16. NAME (Print)			
17. DATE SHIPPED M / D / Y 11 / 11 / 91			

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the EPA and the Wis. Department of Natural Resources. I also certify that the information contained herein is true, accurate and complete.

TRANSPORTER SECTION		
18. COMPANY NAME Mr. Frank, Inc.		19. EPA IDENTIFICATION NO. ILDO69506160
20. P.O. BOX OR STREET ADDRESS 201 West 155th Street		
21. CITY, STATE, ZIP CODE South Holland, IL 60473		22. TELEPHONE NUMBER (312) 596-3377
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>Robert Perkins</i>	25. NAME (Print) Robert Perkins	26. Date Accepted 9/19/91
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical Service		33. EPA IDENTIFICATION NO. INDO16360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax		
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 824-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>Ed Dunne</i>	39. NAME (Print) Ed Dunne	40. Date Accepted 9/19/91
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 5370847. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

124KT-50
9500 BTU
1.71. CP.

HAZARDOUS WASTE MANIFEST

ORIGINAL - NOT NEGOTIABLE

-02-

MANIFEST DOCUMENT NUMBER

4503

SHIPPER NUMBER

0079/018

MR FRANK

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	006252233	Mpls. Coatings & Chemical; 3134 California ST NE Mpls, Mn 55418 612-781-4833	18Dec80
TRANSPORTER # 1	ILD069506160	Mr. Frank, 201 West 155th, South Holland, Ill 60473	18Dec80
TRANSPORTER # 2 (if required)	n/a		
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY	IND016380265	American Chemical Svc, Inc 420 South Colfax Griffith, Ind. 46319 219-924-4370	12/19/80
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # OR NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carriage Use Only)
1/TM	yes	Hazardous Waste, nos (Solvent waste frm paint Mfg.)	K078	Flammable	Gal's	4800		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

For verification of Mpls Coating & Chemical EPA ID#
Contact EPA Region V, Bob Stone, 312-886-6149

PLACARDS TENDERED

Yes ☐ No ☐

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

REMIT
C.O.D. TO:
ADDRESS

COD

Amt: \$ N/A

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ \$TOTAL
CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID ☐ Check box if charges
exceed when box at are to be
right is checked collect

Note—Where the rate is dependent on value, shippers
are required to state specifically in writing the agreed or
declared value of the property.
The agreed or declared value of the property is hereby
specifically stated by the shipper to be not exceeding
\$ _____ per _____

"If the shipment moves between two ports by
a carrier by water, the law requires that the
bill of lading shall state whether it is
"carrier's or shipper's weight."

Signature

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this
Bill of Lading, the property described above in apparent good order, except as noted (contents
and condition of contents of packages unknown), marked, consigned, and destined as
indicated above which said carrier (the word carrier being understood throughout this contract
as meaning any person or corporation in possession of the property under the contract) agrees
to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to
another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at
any time interested in all or any said property, that every service to be performed hereunder
shall be subject to all the bill of lading terms and conditions in the governing classification on
the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in
the governing classification and the said terms and conditions are hereby agreed to by the
shipper and accepted for himself and his assigns

CERTIFICATION

This is to certify that the above-named materials are properly
classified, described, packaged, marked and labeled, and are in
proper condition for transportation according to the applicable
regulations of the Department of Transportation and the U.S. En-
vironmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment,
storage or disposal.

GENERATOR'S SIGNATURE

18Dec80

DATE

TSDF SIGNATURE

DATE

18Dec80

HAZARDOUS WASTE MANIFEST

ORIGINAL - NOT NEGOTIABLE

-03-

MANIFEST DOCUMENT NUMBER

MR FRANK

PO 4594

SHIPPER NUMBER

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND 006252233	Mpls. Coatings & Chemical, 3134 California St. NE Mpls, MN 55418 612-781-4833	14Apr81
TRANSPORTER # 1	IID069506160	Mr. Frank, 201 West 155th, South Holland, ILL 60473 312-596-3377	14Apr81
TRANSPORTER # 2 (If required)	N/A		
TSDT TREATMENT STORAGE OR DIS- POSAL FACILITY	IND016300265	American Chemical Svc, Inc. 420 South Colfax, Griffith, IND 46319 219-924-4370	4-15-81
TSDT TREATMENT STORAGE OR DIS- POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1/TW	yes	Waste Paint, Flammable Liquid	UN1263	No	Gals	4800		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes ☒ No ☐REMIT
C.O.D. TO:
ADDRESS

COD

Amt: \$ N/A

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:

\$ per

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is 'carrier's or shipper's weight.'"

Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

TOTAL
CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID
except when box at
right is checkedCheck box if charges
are to be
correct

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

Ken Friend
GENERATOR'S SIGNATURE

14Apr81

DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDT SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

ORIGINAL - NOT NEGOTIABLE

-07-

MANIFEST DOCUMENT NUMBER

PO 4640

SHIPPER NUMBER

0079029

CARRIER NUMBER

Mr. Frank

NAME OF CARRIER

(SCAC)

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	MND 006252233	Mpls. Coatings & Chemical, 8134 California St. NE Mpls, MN. 612-781-4833	8 June 81
TRANSPORTER # 1	ILL 069506160	Mr. Frank, 201 West 155th, South Holland, ILL 60473 312-596-3377	8 June 81
TRANSPORTER # 2 (If required)	N/A		
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY	IND 016300265	American Chemical Svc. Inc. 420 South Colfax, Griffith, IND 46319 219-924-4370	6/9/81
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1/TW	Yes	Waste Paint, Flammable Liquid	UN 1263	No	Gals	4,500		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes ☒ No ☐REMIT
C.O.D. TO:
ADDRESS

COD

Amt: \$

N/A

C.O.D. FEE:
PREPAID ☐
COLLECT ☐

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID
except when box is
right is checked ☐Check box if charges
are to be
collected ☐

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:

\$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor) _____

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

Robert Reshman
TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR SIGNATURE

8 June 81

DATE

TSDF SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

ORIGINAL - NOT NEGOTIABLE

-10-

MANIFEST DOCUMENT NUMBER

PO 4673

SHIPPER NUMBER

1077035

CARRIER NUMBER

Mr. Frank
NAME OF CARRIER

(SCAC)

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	MD 006252233	Mpls. Coatings & Chemical, 3134 California St. NE Mpls, MN. 612-781-4833	16 July 81
TRANSPORTER # 1	ILL 069506160	Mr. Frank, 201 West 155th, South Holland, ILL 60473 312-596-3377	16 July 81
TRANSPORTER # 2 (If required)	N/A		
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY	IND 016300265	American Chemical Svc. Inc. 420 South Colfax, Griffith, IN 46319 219-924-4370	7/7/81
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # OR NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
1/TW	Yes	Waste Paint, Flammable Liquid	W 1263	No	G als	400		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes ☒ No ☐REMIT
C.O.D. TO:
ADDRESS

COD

Amt: \$ N/A

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:

\$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

(Signature of Consignor)TOTAL
CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID ☐ Check box if charges are to be collect
except when box at right is checked ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE
Ken Friend

DATE

TO EAST ACCT 7-50 7/17/81 JFM

TSDF SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

ORIGINAL - NOT NEGOTIABLE

-13-

MANIFEST DOCUMENT NUMBER

PO 4732

SHIPPER NUMBER

0079/021

CARRIER NUMBER

Mr. Frank

NAME OF CARRIER

(SCAC)

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	MND 006252233	Mpls Coating & Chemicals, 3134 California St. N.E. Minneapolis, MN 55418 (612) 781 4833	10/26/81
TRANSPORTER # 1	ILD 069506160	Mr. Frank, 201 West 155th, South Holland, IL 60473 (312) 596 3377	10/26/81
TRANSPORTER # 2 (if required)	N/A		
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY	IND 016360265	American Chemical Svc., Inc. 420 South Colfax, Griffith, IN 46319 (219) 924 4370	
TSDF TREATMENT STORAGE OR DISPOSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGE (For Carrier Use Only)
1/TW	Yes	Waste Paint, Flammable Liquid	UN 1263	No	Gals	2000		

SPECIAL HANDLING INSTRUCTIONS

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes ☒ No ☐

REMIT C.O.D. TO: ADDRESS

COD

Amt: \$

C.O.D. FEE: PREPAID ☐ COLLECT ☐ \$

TOTAL CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID ☐ except when box at right is checked ☐ Check box if charge are to be collected

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is 'carrier's or shipper's weight.'"

Subject to Section 7 of the conditions, if this shipment is to be delivered to a consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency.

This is to certify acceptance of the hazardous waste shipment.

Robert Perkins 10-26-81

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

Reigh P. Walling
GENERATOR'S SIGNATURE

10/26/81

DATE

TSDF SIGNATURE

TO 211E J-50 10/27/81

DATE

See reverse side for instructions
Please TYPE or PRINT clearly using a ball point pen — PRESS HARD

State of Minnesota
HAZARDOUS WASTE SHIPPING PAPER

① SHIPMENT NO. 1

GENERATOR—SHIPPER NAME ② Enla Coatings & Chemicals Div		SITE I.D. NO. ③
PICKUP ADDRESS ④ 3134 California St. NE		EPA I.D. ⑤ MD 006252233
CITY, STATE, ZIP CODE ⑤ Minneapolis, MN 55418		PHONE NO. ⑥ 612/781-4633
BUSINESS ADDRESS ⑦ SAME AS ABOVE		

TRANSPORTER (CARRIER) ⑮ South Holland, IL 60473		MPCA REGISTRATION NO. ⑮ 312/535-5377
BUSINESS ADDRESS ⑮ 201 West 155th		EPA I.D. ⑮ MD 006252233
CITY, STATE, ZIP CODE ⑮ South Holland, IL 60473		PHONE NO. ⑮ 312/535-5377
DATE RECEIVED ⑮ 4/24/81	The wastes described above were received by me for shipment to the named Hazardous Waste Facility.	
AUTHORIZED SIGNATURE ⑮ [Signature]		TITLE ⑮ DRIVER
SHIPMENT INTERLINED ⑮ N/A	MPCA REGISTRATION NO. EPA I.D.	MPCA REGISTRATION NO. EPA I.D.
DATE RECEIVED ⑮ 4/24/81	AUTHORIZED SIGNATURE ⑮ [Signature]	

⑧ No.	QUANTITY SHIPPED	HAZ. MAT.	KIND OF UNIT—PROPER DOT SHIPPING NAME	DOT HAZ. CLASS	SHIPPING WEIGHT
1	7800	X	Flam. Waste Paint, UN263	Flammable	37000
2				Liquid	
3					
4					
5					

⑨ Does Generator Plan authorize commingling? ☐ YES ☒ NO
(If "YES", attach sheet listing other generators and quantities of waste.)

⑩ No.	WASTE CODE	MPCA HAZARDOUS PROPERTY	APPROXIMATE PRODUCTION DATES
1	111263	Flammable	From 2 To Jan 1981
2			
3			
4			
5			

⑪ SPECIAL INSTRUCTIONS

☐ SPECIAL EMERGENCY PROCEDURE ATTACHED

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labelled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

The wastes described above were consigned to the Carrier named. The Hazardous Waste Facility can and will accept this shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

DATE SHIPPED ⑫ 4/23/81	AUTHORIZED SIGNATURE ⑬ [Signature]	TITLE ⑬ Manager
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HAZARDOUS WASTE FACILITY	
FACILITY NAME ⑮ American Chemical Soc. Inc.	STATE PERMIT/LICENSE NO. ⑮ 27
SITE ADDRESS ⑮ 420 South Colfax	EPA I.D. ⑮ MD 016262295
CITY, STATE, ZIP CODE ⑮ Griffith, IN 46310	PHONE NO. ⑮ 30
DATE RECEIVED ⑮ 4/24/81	The wastes described above have been received for processing as per current and valid state permit and/or other applicable laws and ordinances. <input checked="" type="checkbox"/> For exceptions see attachment.
AUTHORIZED SIGNATURE ⑮ [Signature]	TITLE ⑮ 33
DATE WASTE DISPOSED ⑮ 4/24/81	I certify that the above named wastes have been processed and/or disposed.
AUTHORIZED SIGNATURE ⑮ [Signature]	TITLE ⑮ 36

⑮ MAIL TO: HAZARDOUS WASTE, MIS
322 WASHINGTON AVE. S.
HOPKINS, MN 55343

TO EAST ACIT 4/24/81 7-30 97m

In case of a spill in Minnesota, immediately call the MPCA 24-hour emergency number, (612) 296-7373, and the National Response Center, (800) 424-8802

1. White—Hazardous Waste Facility Mail to Generator
2. Yellow—Generator (Shipper) Mail to ⑮
3. Pink—Hazardous Waste Facility Mail to ⑮
4. Orange—Hazardous Waste Facility Mail to Generator
5. Gold—Hazardous Waste Facility Retain
6. Blue—Transporter (Carrier) Retain
7. Green—Generator (Shipper) Retain

PQ-00280-02
HC 5406 (4-80)

000930

See reverse side for instructions

Please TYPE or PRINT clearly using a ball point pen — PRESS HARD

State of Minnesota
HAZARDOUS WASTE SHIPPING PAPER

① SHIPMENT NO.

GENERATOR—SHIPPER NAME ② Imps Coating & Chemical Div		SITE I.D. NO. ③
PICKUP ADDRESS ④ 3134 California St. NE		EPA I.D. MND 006252233
CITY, STATE, ZIP CODE ⑤ Minneapolis, MN 55418		PHONE NO. ⑥ 612/781-4833
BUSINESS ADDRESS ⑦ SAME AS ABOVE		

TRANSPORTER (CARRIER) TRANSPORTER NAME ⑮ MR IRANK (Tank)		MPCA REGISTRATION NO. ⑯
BUSINESS ADDRESS ⑰ 201 West 155th		EPA I.D. ILL 016360265
CITY, STATE, ZIP CODE ⑱ South Holland, ILL 60473		PHONE NO. ⑲ 312/596-3377
DATE RECEIVED ⑳ 4/14/81	The wastes described above were received by me for shipment to the named Hazardous Waste Facility.	
AUTHORIZED SIGNATURE ㉑ W. E. N. O. R. N.		TITLE ㉒ Driver
SHIPMENT INTERLINED ㉓ N/A	MPCA REGISTRATION NO. EPA I.D.	MPCA REGISTRATION NO. EPA I.D.
DATE RECEIVED ㉔		
AUTHORIZED SIGNATURE ㉕ X		

⑧ No.	QUANTITY SHIPPED	HAZ. MAT.	KIND OF UNIT—PROPER DOT SHIPPING NAME	DOT HAZ. CLASS	SHIPPING WEIGHT
1	7800	X	Gals, Waste Paint, UN1263	Flammable	38000
2				Liquid	
3					
4					
5					

⑨ Does Generator Plan authorize commingling? ☐ YES ☒ NO
(If "YES", attach sheet listing other generators and quantities of waste.)

HAZARDOUS WASTE FACILITY FACILITY NAME ⑲ American Chemical Soc, Inc		STATE PERMIT/LICENSE NO. ㉗
SITE ADDRESS ㉘ 420 South Colfax		EPA I.D. ILL 016360265
CITY, STATE, ZIP CODE ㉙ Griffith IND 46319		PHONE NO. ㉚ 219/924-1370
DATE RECEIVED ㉛ 4/15/81	The wastes described above have been received for processing as per current and valid state permit and/or other applicable laws and ordinances. <input checked="" type="checkbox"/> For exceptions see attachment.	
AUTHORIZED SIGNATURE ㉜ X		TITLE ㉝
DATE WASTE DISPOSED ㉞ 7/15/81		I certify that the above named wastes have been processed and/or disposed.
AUTHORIZED SIGNATURE ㉟ X		TITLE ㊱

⑩ No.	WASTE CODE	MPCA HAZARDOUS PROPERTY	APPROXIMATE PRODUCTION DATES
1	UN1263	Flammable	From To ? 1980 Jan
2			
3			
4			
5			

⑪ SPECIAL INSTRUCTIONS

☐ SPECIAL EMERGENCY PROCEDURE ATTACHED

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labelled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

The wastes described above were consigned to the Carrier named. The Hazardous Waste Facility can and will accept this shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

TO WEST AGIT
T-50 1/15/81
gjm

MAIL TO: HAZARDOUS WASTE, MIS
322 WASHINGTON AVE. S.
HOPKINS, MN 55343

In case of a spill in Minnesota, immediately call the MPCA 24-hour emergency number, (612) 296-7373, and the National Response Center, (800) 424-8802

1. White—Hazardous Waste Facility Mail to Generator
2. Yellow—Generator (Shipper) Mail to ⑮
3. Pink—Hazardous Waste Facility Mail to ⑰
4. Orange—Hazardous Waste Facility Mail to Generator
5. Gold—Hazardous Waste Facility Retain
6. Blue—Transporter (Carrier) Retain
7. Green—Generator (Shipper) Retain

PQ-00280-02
HC 5406 (4-80)

DATE ⑫ 14 Apr 81	AUTHORIZED SIGNATURE ⑬ X	TITLE ⑭ Manager
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000929

See reverse side for instructions
Please TYPE or PRINT clearly using a ball point pen

State of Minnesota
HAZARDOUS WASTE SHIPPING PAPER

① SHIPMENT NO.

000931

GENERATOR—SHIPPER NAME ② Mpls Coatings & Chemicals		SITE I.D. NO. ③
PICKUP ADDRESS ④ 3134 California St. N.E.		EPA I.D. MND 006252233
CITY, STATE, ZIP CODE ⑤ Minneapolis, MN 55418		PHONE NO. ⑥ (612) 781 4833
BUSINESS ADDRESS ⑦ Same as above		

TRANSPORTER (CARRIER) ⑮ Mr. Frank		MPCA REGISTRATION NO. ⑮ 0077021
BUSINESS ADDRESS ⑰ 201 West 155th		EPA I.D. JID 069506160
CITY, STATE, ZIP CODE ⑱ South Holland, IL 60473		PHONE NO. ⑲ (312) 596 3377
DATE RECEIVED ⑳ 10/26/81	The wastes described above were received by me for shipment to the named Hazardous Waste Facility.	
AUTHORIZED SIGNATURE ㉑ [Signature]		TITLE ㉒ DRIVER
SHIPMENT INTERLINED ㉓	MPCA REGISTRATION NO.	MPCA REGISTRATION NO.
	EPA I.D.	EPA I.D.
DATE RECEIVED ㉔		
AUTHORIZED SIGNATURE ㉕		

⑧ No.	QUANTITY SHIPPED	HAZ. MAT.	KIND OF UNIT—PROPER DOT SHIPPING NAME	DOT HAZ. CLASS	SHIPPING WEIGHT
1	2000	X	Gals, Waste Paint, UN 1263	Flammable	
2				Liquid	
3					
4					
5					

⑨ Does Generator Plan authorize commingling? ☐ YES ☒ NO
(If "YES", attach sheet listing other generators and quantities of waste.)

⑩ No.	WASTE CODE	MPCA HAZARDOUS PROPERTY	APPROXIMATE PRODUCTION DATES From To
1	U N 12 5 3	Flammable	? Sept 1981
2			
3			
4			
5			

⑪ SPECIAL INSTRUCTIONS

☐ SPECIAL EMERGENCY PROCEDURE ATTACHED

SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

The wastes described above were consigned to the Carrier named. The Hazardous Waste Facility can and will accept this shipment of hazardous waste, and has a valid permit to do so. I certify that the foregoing is true and correct to the best of my knowledge.

HAZARDOUS WASTE FACILITY FACILITY NAME ⑲ American Chemical Svc. Inc.		STATE PERMIT/LICENSE NO. ⑲
SITE ADDRESS ⑲ 420 South Colfax		EPA I.D. IND 01630265
CITY, STATE, ZIP CODE ⑲ Griffith, IN 46310		PHONE NO. ⑳ (219) 924 4370
DATE RECEIVED ㉑ 10/27/81	The wastes described above have been received for processing as per current and valid state permit and/or other applicable laws and ordinances. ㉓ <input type="checkbox"/> For exceptions see attachment.	
AUTHORIZED SIGNATURE ㉒ [Signature]		TITLE ㉓
DATE WASTE DISPOSED ㉔	I certify that the above named wastes have been processed and/or disposed.	
AUTHORIZED SIGNATURE ㉕ [Signature]		TITLE ㉖

70211X ㉗ MAIL TO: HAZARDOUS WASTE, M/S.
322 WASHINGTON AVE. S.
HOPKINS, MN 55343

In case of a spill in Minnesota, immediately call the MPCA 24-hour emergency number, (612) 296-7373, and the National Response Center, (800) 424-8802

1. White—Hazardous Waste Facility Mail to Generator
2. Yellow—Generator (Shipper) Mail to ㉗
3. Pink—Hazardous Waste Facility Mail to ㉗
4. Orange—Hazardous Waste Facility Mail to Generator
5. Gold—Hazardous Waste Facility Retain
6. Blue—Transporter (Carrier) Retain
7. Green—Generator (Shipper) Retain

PQ-00280-02
HC 5406 (4-80)

DATE ㉘ SHIPPED 10/26/81	AUTHORIZED SIGNATURE ㉙ [Signature]	TITLE ㉚ Manager
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SHIPPED 10/27/81	㉛ [Signature]	㉜ [Signature]
-------------------------	----------------------	----------------------

4. Orange—Hazardous Waste Facility Mail to Generator

PQ-00280-02
HC 5406 (4-80)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. SMALL QNTY. GENERATOR		Manifest Document No. 12181		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Miracle Auto Painting & Body Repair 1815 East Apache Blvd., Tempe, AZ 85281						A. State Manifest Document Number							
4. Generator's Phone (602) 829-8320						B. State Generator's ID							
5. Transporter 1 Company Name Adco Express			6. US EPA ID Number ILD 047 267 364			C. State Transporter's ID 0367							
7. Transporter 2 Company Name RAY TECH EXPRESS			8. US EPA ID Number ILD 980904304			D. Transporter's Phone 312-429-1660							
						E. State Transporter's ID 1846							
						F. Transporter's Phone 312-429-9888							
9. Designated Facility Name and Site Address American Chemical Service 420 South Colfax Avenue Griffith, IN 46319						10. US EPA ID Number IND 016 360 265							
						G. State Facility's ID							
						H. Facility's Phone 319-921-4370							
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit W/Vol		15. Waste No.	
a. HQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263						2 dm		106		0		F003	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above 0 - Gallon							
15. Special Handling Instructions and Additional Information													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name L.H.H.						Signature <i>[Signature]</i>						Month Day Year 11 1 88	
17. Transporter 1 Acknowledgement of Receipt of Materials													
Printed/Typed Name LEON J. GAVIN						Signature <i>[Signature]</i>						Month Day Year 11 9 88	
18. Transporter 2 Acknowledgement of Receipt of Materials													
Printed/Typed Name Donald E. Horn						Signature <i>[Signature]</i>						Month Day Year 11 9 88	
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name WILLIAM A. JAKOB						Signature <i>[Signature]</i>						Month Day Year 12 1 88	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. SMALL QNTY. GENERATOR		Manifest Document No 21388H		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Miracle Mile Collision 5020 Winona, Toledo, OH 43613						A. State Manifest Document Number							
4. Generator's Phone (419) 473-1157						B. State Generator's ID							
5. Transporter 1 Company Name ADCO Express						C. State Transporter's ID 0367							
6. US EPA ID Number ILD 047 267 364						D. Transporter's Phone 312-429-1660							
7. Transporter 2 Company Name						E. State Transporter's ID							
8. US EPA ID Number						F. Transporter's Phone							
9. Designated Facility Name and Site Address American Chemical Service 420 South Colfax Avenue Griffith, IN 46319						G. State Facility's ID							
10. US EPA ID Number IND 016 360 265						H. Facility's Phone 219-924-4370							
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. <input checked="" type="checkbox"/> RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263						No. 2		Type dm		100.		G F003	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above B - Gallon							
15. Special Handling Instructions and Additional Information													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name <i>[Signature]</i>						Signature <i>[Signature]</i>				Month Day Year <i>[Signature]</i>			
17. Transporter 1 Acknowledgement of Receipt of Materials													
Printed/Typed Name <i>[Signature]</i>						Signature <i>[Signature]</i>				Month Day Year <i>[Signature]</i>			
18. Transporter 2 Acknowledgement of Receipt of Materials													
Printed/Typed Name						Signature				Month Day Year			
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name <i>[Signature]</i>						Signature <i>[Signature]</i>				Month Day Year <i>[Signature]</i>			



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

311250

PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch) typewriter.)

Form Approved, OMB No. 2050-0039, Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

IND0016372849

Manifest Document No.

2. Page 1

Information in the shaded areas is not required by Federal law, but State law.

3. Generator's Name and Mailing Address

MIZE TOWNE & COUNTRY AUTO SALES
PO BOX 437
SCHERERVILLE IN 46375

4. Generator's Phone ()

317 455 3800

5. Use EPA ID Number

IND0016372849

7. Transporter 2 Company Name

IND0016372849

8. Use EPA ID Number

IND0016372849

9. Designated Facility Name and Site Address

AMERICAN CHEMICAL SERVICE
420 S. PULASKI
GRIFFITH IN 46341

10. Use EPA ID Number

IND0016372849

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)

FLAMMABLE LIQUID, N.O.S. (F.L.N.O.S.)
NA1263

12. Containers

No. Type

1 200 L Drum

13. Total Quantity

Vol.

200 L

14. Unit

Wt/Vol

200 L

15. Waste No.

NA1263

16. Additional Descriptions for Materials Listed Above

FLAMMABLE LIQUID, N.O.S. (F.L.N.O.S.)
NA1263

17. Handling Codes for Wastes Listed Above

NA1263

18. Special Handling Instructions and Additional Information

DOT - 1263

19. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

JOHN F. WILSON

Signature

[Signature]

Date

Month Day Year

11 11 87

20. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

ALONSO ESPINOSA

Signature

[Signature]

Date

Month Day Year

11 11 87

21. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

[Name]

Signature

[Signature]

Date

Month Day Year

[Date]

22. Discrepancy Indication Space

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[Space]

[Space]

[Space]

[Space]

[Space]

DISTRIBUTION: PAGE 1 (white) TSD MAIL TO GENERATOR

PAGE 2 (goldenrod) GENERATOR MAIL TO GENERATOR STATE

PAGE 3 (light green) TSD MAIL TO TSD STATE

PAGE 4 (light pink) OUT OF STATE GENERATOR/TSD MAIL TO IDEM

PAGE 5 (light blue) TSD COPY

PAGE 6 (canary) GENERATOR COPY

PAGE 7 (white) TRANSPORTER 1 COPY

PAGE 8 (white) TRANSPORTER 2 COPY

012835

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day), or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest Document No.

2. Page 1

Information in the shaded areas is not required by Federal law, but items D, H, and I are required by State law.

3. Generator's Name and Mailing Address

MIZE TOWN & COUNTRY AUTO SALES
PO BOX 437
SCOTTSVILLE IN 46375

A. State Manifest Document Number

INA 0147084

4. Generator's Phone ()

5. Transporter 1 Company Name

6. Use EPA ID Number

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone ()

7. Transporter 2 Company Name

8. Use EPA ID Number

E. State Transporter's ID

F. Facility's Phone ()

9. Designated Facility Name and Site Address

10. Use EPA ID Number

G. State Facility's ID

H. Facility's Phone ()

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers

13. Total Quantity

14. Unit

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

17. Transporter 1 Acknowledgement of Receipt of Materials

18. Transporter 2 Acknowledgement of Receipt of Materials

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted item 19.

Printed/Typed Name

Signature

Month Day Year

Printed/Typed Name

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Month Day Year

In case of a spill call Indiana Office of Environmental Response at 317/243-5155 (day) or 317/633-0144 (night) and the National Response Center at 800/424-8802 or 202/426-2675.

126JCT633/3M

0015326

INA 0147084

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. IND 026 372 849 9		Manifest Document No. 12128K		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Towns & Countree 67th Place & Route 41, Schererville, IN 46375						A. State Manifest Document Number			
4. Generator's Phone (219) 865-3800						B. State Generator's ID			
5. Transporter 1 Company Name Strand Trucking				6. US EPA ID Number IND 000 646 810		C. State Transporter's ID 0311			
7. Transporter 2 Company Name				8. US EPA ID Number		D. State Transporter's Phone 312-385-8440			
9. Designated Facility Name and Site Address American Chemical Service 420 South Colfax Avenue Griffith, IN 46319				10. US EPA ID Number IND 016 360 265		E. State Transporter's ID			
						F. Transporter's Phone			
						G. State Facility's ID			
						H. Facility's Phone 219-924-4370			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity	
						No. Type		Unit	
a. WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263						2 dm		100 G	
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above			
						G - Gallon			
15. Special Handling Instructions and Additional Information									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name KEITH T. DARTER					Signature Keith T. Darter				
					Month Day Year 12 20 88				
17. Transporter 1 Acknowledgement of Receipt of Materials									
Printed/Typed Name James M. Smith					Signature James M. Smith				
					Month Day Year 12 20 88				
18. Transporter 2 Acknowledgement of Receipt of Materials									
Printed/Typed Name					Signature				
					Month Day Year				
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name William A. Baker					Signature William A. Baker				
					Month Day Year 12 20 88				

12-6TCTG312/51

TSDF COPY

0015148

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. S M Q N T Y G E N E R T 1 1 2 3 9 H		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Towne & Countree 67th Place and Route 41, Schererville, IN 46375						A. State Manifest Document Number							
4. Generator's Phone (219) 865-3800						B. State Generator's ID							
5. Transporter 1 Company Name ADCOM EXPRESS						C. State Transporter's ID 0367							
6. US EPA ID Number 1 1 2 3 9 H 4 7 2 6 7 3 6 4						D. Transporter's Phone 708-429-1660							
7. Transporter 2 Company Name						E. State Transporter's ID							
8. US EPA ID Number						F. Transporter's Phone							
9. Designated Facility Name and Site Address American Chemical Service 420 South Colfax Avenue Griffith, IN 46319						G. State Facility's ID							
10. US EPA ID Number I N D O 1 6 3 6 0 2 6 5						H. Facility's Phone 219-924-4370							
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. <input checked="" type="checkbox"/> RQ WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263						001		99950		G		F003	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above 6 Gallon							
15. Special Handling Instructions and Additional Information													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name J. J. J. J.						Signature J. J. J. J.						Month Day Year 11 11 11	
17. Transporter 1 Acknowledgement of Receipt of Materials													
Printed/Typed Name J. J. J. J.						Signature J. J. J. J.						Month Day Year 11 11 11	
18. Transporter 2 Acknowledgement of Receipt of Materials													
Printed/Typed Name						Signature						Month Day Year	
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name J. J. J. J.						Signature J. J. J. J.						Month Day Year 11 11 11	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. IND0163728497318		Manifest Document No.		2. Page 1 of 6		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Tome & Countree 67th Place & Route 41, Schererville, IN 46375						A. State Manifest Document Number			
4. Generator's Phone (219) 865-3800						B. State Generator's ID			
5. Transporter 1 Company Name ADCOM EXPRESS						6. US EPA ID Number IL0047267364		C. State Transporter's ID 0367	
7. Transporter 2 Company Name						8. US EPA ID Number		D. Transporter's Phone 312-429-1660	
9. Designated Facility Name and Site Address American Chemical Service 420 South Colfax Avenue Griffith, IN 46319						10. US EPA ID Number IND016360209		E. State Transporter's ID	
								F. Transporter's Phone	
								G. State Facility's ID	
								H. Facility's Phone 219-924-4370	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers No. Type		13. Total Quantity	
a. RM WASTE PAINT RELATED MATERIAL (F003) FLAMMABLE LIQUID NA 1263						1002 d		110 G	
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above 6 - Gallon			
15. Special Handling Instructions and Additional Information									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name Tome & Countree						Signature [Signature]		Month Day Year 11 11 89	
17. Transporter 1 Acknowledgement of Receipt of Materials									
Printed/Typed Name STEPHEN SEERUP						Signature [Signature]		Month Day Year 11 11 89	
18. Transporter 2 Acknowledgement of Receipt of Materials									
Printed/Typed Name						Signature		Month Day Year	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name [Signature]						Signature [Signature]		Month Day Year 11 11 89	